"THE LANCET"

FIRST SPECIAL SUPPLEMENT,

IN SUPPORT OF THE

METROPOLITAN HOSPITAL SUNDAY FUND.

CONCERNING EVERYBODY.

THE Hospitals Week, commencing on Monday, June 21st, which is the prologue to Hospital Sunday, June 27th, is a movement which concerns and should interest all sorts and conditions of men and women in this vast city of London. From the monarch on the throne to the meanest subject in Her Majesty's Empire, from the peer to the pauper, all have need of, and are dependent in the hour of humanity's sorest trial upon, the efficiency of our hospital system for relief and succour. The recognition of this fact no doubt accounts for the presence of the names of the many illustrious and representative men on the imposing list of speakers who will take part in the meetings to be held in every district of London during the Hospitals Week. The list which will be found on p. 13 of this special supplement of THE LANCET, is eloquent, not only by virtue of the names which it contains but also from the absence of others which might reasonably have been expected to appear upon it. The neutral platform this movement affords to the political leaders, who have here an opportunity of turning aside for a brief interval from the turmoil of politics, will be ascended by the more thoughtful of them with feelings of thankfulness, because they will be able to prove once more by their action that one touch of nature makes the whole world kin. No great popular leader can deliberately allow the people to suspect, much less to believe, that he is unwilling to aid, or callous concerning the provision of adequate means for fully relieving the unavoidable illnesses and accidents to which the masses of his fellow-citizens are liable.

All must agree with Rabelais, that "without health life is not life; it is not living life. Without health life is only a state of languor and an image of death." This thought is brought home with greater force, perhaps, to the poor than to any other class. We cannot but believe that all who consent to aid this great crusade against the common enemy to all our race will certainly not miss their reward at the hands of their grateful countrymen. A movement like this arouses all the best feelings of our nature, and so surely as sickness and suffering are no respecters of persons, so surely will those who at some personal sacrifice devote a portion of their health and strength to secure the provision of abundant relief to their less fortunate and suffering neighbours, be better prepared to face the hour of trial when it is their turn to be struck down by an accident or to be overtaken by illness.

> Ah, what avail the largest gifts of Heaven
> When drooping health and spirits go amiss?
> How tasteless then whatever can be given!
> Health is the vital principle of bliss.

So true is it "he dies every day who lives in a languishing state," that none who think at all seriously of life's responsibilities can turn a deaf ear to an appeal for an adequate supply of funds to keep health's machinery, and all those agencies which may be broadly described as health preservers, in efficiency and order.

If this be so, then the diminution in the volume of support which has characterised the last few years' experience of the managers of the London hospitals would be difficult indeed to account for, except that neglect of duty is usually due rather to want of thought than to want of heart. It is, indeed, this experience of the commonest cause of most indifference and neglect which warrants a hopeful estimate of the results which will probably follow the awakening of the public conscience to the needs of the hospitals as one effect of the proceedings in the Hospitals Week. To secure this much, however, it is essential that everyone should put his shoulder to the wheel. Let everybody, therefore, give a hand to the movement. The orator by his eloquence; the leaders of public opinion and of fashion by their presence on the platform; the public by attending the meetings in large numbers; the press by devoting ample space to reports of the proceedings; those who earn their wealth in the City, but who reside outside its area, by sending a cheque to the Lord Mayor at the Mansion House; and all by making it their business to give, at any rate something, in support of the hospitals through the Hospital Sunday Fund. To those who have wealth, a generous and old supporter of the hospitals, Dr. Wakley, who last year gave a donation of £1000 to the Fund, has offered a challenge, by placing another £1000 in the hands of the Lord Mayor for the Hospital Sunday Fund providing four others send an equal sum before the end of July. It is the privilege, as well as the duty, of all classes to combine to make a long pull, a strong pull, and a pull altogether in aid of the hospitals during the Hospitals Week. Shall it be longer possible to say of us, the inhabitants of the wealthiest city in the world, that we give less in proportion to the hospitals than any other city in the British Empire?

Lavater has said there are but three classes of men: the retrograde, the stationary, and the progressive. Londoners, so far as the hospitals are concerned, putting the most favourable judgment on their actions, belong to the stationary, if they are not already entering the retrograde class. This lamentable position is due, in our belief, chiefly to the entire ignorance of the value and work of hospitals to be met with amongst the great majority of all classes of the people. Their knowledge of the subject is limited to the passing acquaintance which they may have of the outside appearance of the one particular hospital which happens oftenest to confront them in their walks abroad. Will they do us the favour, and themselves the justice, of going with us within the hospital walls? The inner life and work of these noble charities are brought by means of this Supplement within a measurable distance of all, and none need longer be content to survey the hospitals through a long vista.

At any rate, we have done our best in these pages, and the leading men of all classes will do their best at the various meetings throughout the Hospitals Week, and the ministers of all the churches will do theirs on Hospital Sunday, to cause Londoners to awake from their lethargy in this matter, and to prove once more that the people of the first city in the Empire have hearts as warm and purses as open as are to be found anywhere in the whole world. The fact that a man lives in the midst of a population of upwards of four millions does not absolve him from the calls of duty or the claims of humanity, and we are convinced that if the attention of the people can only be aroused, as it ought to be aroused, the £80,000 so urgently needed by the hospitals will be gladly suscribed by the combined contributions of all classes of Londoners.

WITHIN THE HOSPITAL WALLS.

A MATTER-OF-FACT NARRATIVE.

(By a Special Commissioner.)

MOST Londoners are familiar with the outside characteristics of certain spacious three-storeyed buildings, to be found in most of the crowded districts of the metropolis. With but an exception or two, they lay claim to no architectural beauty, and attract attention more generally by their brooding ugliness. Most of them were built at a time when architectural taste had temporarily disappeared from this island; and the addition of wings, outbuildings, and unnatural excrescences, to meet the wishes of modern sanitary science, has invariably robbed them of the little beauty they started with. Then, as often as not, scantiness of funds has prevented the architect from stepping an inch beyond the limits of strict utility. Besides, having started plain or ugly, and maintained the traditions up to modern times, it has not been easy for the governing bodies of the day to seriously improve the outside appearance of their institutions. To add a handsome wing to a blackened and weather-frayed structure is, by the contrast occasioned, to increase rather than to diminish the prevailing dreariness. Moreover, it has always been, and still is, a principle with governors that funds available for architectural decoration are better expended in ministering to the comfort of patients, and curing them inside the building, than in offering up outside fresh victims in the shape of polished granite and carved stonework to that scarifying demon of our metropolitan streets—London soot. The heavy awkwardness of the pile is rendered more oppressive by the usual absence of blind and curtain, to soften the oppressive blackness of the windows. Occasionally the gloominess of the window is even enhanced by the lower panes being frosted, and by the black upper panes gaping open for purposes of ventilation in a chilly, dismal manner. No matter how grim and devoid of features to arrest the fancy the façade may be, the inscription "Supported by Voluntary Contributions" is, nevertheless, religiously kept clean and distinct. But the generality of mankind confine their gaze more to the earth than to heaven; and as in most cases this invocation to subscribe might be above the range of sight, the inscription is commonly repeated on the doors and the palings, accompanied by gaping money-boxes, and sometimes a staring fervent appeal for aid.

TROOPING TO THE HOSPITAL.

Every morning the streets converging upon these buildings are thronged by "the lame, the halt, and the blind." Black being the raiment of respectability among the lower middle classes, and those who gain their livelihood by working at various trades, this colour is the prevailing hue of the "out-patient" pilgrims. Light colours betoken a levity out of place in the waiting-rooms of a general hospital, and are only donned by the foolish and frivolous, or by those unfortunates who "went in" for gay apparel in the hour of health and good pay, and who have no other clothes to come in. These, however, try to conform to decency by bringing their bottles and gallipots in black bags, or by adopting a respectable mournfulness of behaviour. Thus the stranger, finding himself in the vicinity of a great hospital at certain hours of the morning, carries away a general impression of black clothes and white bandages, green bottles protruding from black bags, and crutches, eye-shades, and arms in slings, which is not at all calculated to inspire him with a vigorous appetite for luncheon. Should he travel third class on certain suburban lines, he will find that there are trains in the morning known as "hospital trains," when the larger proportion of the occupants of the third-class carriages are out-patients proceeding to town, who not only create a peculiar out-patient atmosphere of their own in the compartment they may be travelling in, but, being often known to one another, convert the said compartment into a sort of forum for the lugubrious discussion of diseases and the ills incidental to man.

WHAT THE HOSPITAL IS SUPPOSED TO BE LIKE.

Thus, everything tends to favour the popular impression that the hospital is a very dismal institution, hardly better than a prison; and few, we imagine, pay a first visit to one without making up their minds to be affected with a nightmare of sorrow and suffering for days to come. As for taking any interest in the hospital, to say nothing of feelings of pride, what average Englishman is there who considers himself under an obligation to concern himself in the least about it while in good health? Yet, as we shall directly show, a general hospital in our great metropolis is not merely an institution founded by the charitable rich for the suffering poor, and therefore, on purely moral and humanitarian grounds, to be commended, but is vitally associated with the personal well-being of every Londoner, no matter to what grade of society he may belong or how sound may be his health. Without exaggerating the case in any respect, it may be said that there is no individual who is not already indebted to the hospital, although he may have never personally applied for relief; and it will not be difficult in a brief account of life in a typical general hospital to demonstrate to the healthiest and most selfish Londoner the immense benefits conferred on him, as well as upon everybody else, by our metropolitan institutions for the alleviation of the sick.

HOW DYER, THE MECHANIC, CAME TO ENTER THE HOSPITAL.

It is not a twelvemonth ago that a mechanic was admitted into the General Hospital suffering from a punctured eyeball. He had been employed at the Dudgeon Engineering Works on the Thames, and was within one hour of taking his discharge, when, in striking almost a final blow at his last piece of work, a bit of metal flew up and entered the eye. A few months previously the works had passed into the hands of a limited liability company, and whatever kindly feeling had at one time existed between master and man had disappeared under the new *régime*. The business was placed "on an improved footing," which meant a general reorganisation and suppression of certain branches that did not pay, accompanied by a turn out of many of the old hands without any reference to the claims they had on the owners by reason of long and faithful service. Among those discharged was this hard-working mechanic, named Dyer, who had been employed most of his working life in the place, and who was of acknowledged respectability. Sickness in his large family at different times, and troubles occasioned through trying to buy his house from a bogus building society, had brought him down to the level of his actual wages, and he had but a poor prospect before him, when, on being helped to the nearest doctor's, the cashier's clerk put his last pay into his pocket. The man was recommended to go the next morning "to the hospital."

THE HOSPITAL IS ALWAYS READY FOR YOU.

Patients suffering from ordinary ailments or diseases commonly enter a general hospital through the "out-patient" department. Furnished with a governor's letter, which is always obtained readily enough, anybody can secure the advice of the physicians and surgeons on duty for the day, and if they decide that his or her illness is of such a character as to require treatment inside the hospital, the patient can enter at once, providing there be a vacant bed. Entrance may be also obtained on the special recommendation of the physicians and surgeons; but there is one essential difference between medical and surgical cases, between illnesses and hurts, that persons suffering from the latter can claim attention at any time. The hospital door is always

open to accidents. Night and day, Sunday and week-day, the porter stands at the door ready to pass in and conduct to the house-surgeon anyone appearing with an accidental wound; and no matter how trivial the injury may be, and without any reference to the dress of the applicant, surgical attention is immediately given, and no demand pressed for a letter of recommendation or for payment. A general hospital makes no distinction between the thriftless and the thrifty in the hour of need. Hour after hour, day after day, year after year, it stands ready to bestow the best medical advice and the kindliest compassion on all who may cross its threshold. A man may pass a whole lifetime, and never think once seriously about the hospital, or bestow a sixpence upon it. Yet all this while the door has remained open night and day ready to receive him should bodily harm ever befall him, and the benevolence of the more thoughtful has kept in motion the machinery of medical talent and nursing skill, in spite of inadequate funds and lagging contributions.

IS YOUR CASE LIKE DYER'S?

Tom Dyer, the mechanic, confessed to himself, as he was jolted along in a cab to the General Hospital, that his contributions to the Hospital Sunday Fund had never gone beyond a copper or two, and not even that when he happened to stay away from church on the annual anniversary; but he thought he was not quite so bad as Jack Brown, who made it a joke that on Hospital Saturday he always rushed to a "pub" the moment he knocked off work, and stayed in the bar till dark, to avoid the solicitations of street collectors on his way home. Sometimes Brown got drunk before dark, and went home reeling, in which case he admitted that he might have given something to the Hospital Saturday people "unbeknown to himself," but he would take his oath he never had while sober. No such levity as this rested upon the conscience of Dyer, nor, in fact, did his reproaches go very deep, as he had a vague impression that the hospitals were more or less richly endowed by the wealthy classes, or were kept going by their annual contributions. He wished at one moment he had given a silver threepenny-piece at the collections instead of a copper; and then he thought that the Hospital Sunday collection taking place only once a year, he might have spared a shilling; but he was really too ill to go far into the *pros* and *cons* of the subject. For the moment his eye was more sensitive than his conscience.

ARRIVAL AT THE HOSPITAL.

Arrived at the hospital, one of the porters assisted him to alight and conducted him into the house-surgeon's receiving-room. At all general hospitals, in proportion to their size and wants, there are a number of house-surgeons and house-physicians, who take it in rotation night and day to receive and treat any cases admitted requiring immediate attention. In the General Hospital[1] there were five resident house-physicians and five resident house-surgeons, besides a couple of resident dressers. Being situated in the heart of a crowded manufacturing district, its staff was necessarily large. The house-surgeon had just disposed of a sprained wrist case as Dyer entered the room—a large, warm, and well-ventilated apartment, with a lavatory in one corner, cases of surgical instruments on the walls, tin boxes containing bandages and antiseptic dressings on the side tables, and a general litter of bottles of drugs and surgical appliances; everything handy and ready for use, and presided over by the house-surgeon, middle-aged, prompt, energetic, and swift in decision; the dresser, a budding student, assiduous and helpful; and a nurse, hovering quietly about, and anticipating every wish of the surgeon in preparing the patient for examination; retiring afterwards to the background to put in their place or clean any things used in dealing with previous patients, at the same time keeping on the *qui vive* to render fresh aid if necessary. "A severe punctured wound," said the house-surgeon, after examining the eye and eliciting particulars of the accident. "You will require immediate treatment as an in-patient, and will be taken to the Ophthalmic ward at once."

DYER EXAMINED BY THE DOCTOR.

The well-known ophthalmic surgeon and professor of ophthalmic medicine and surgery was going his rounds when Dyer entered the ward, and had him conveyed to a small darkened chamber, where at the close of a prolonged inspection he warned him that it would be necessary to remove the eye. "All the beds in the Eye ward are full, and you cannot be accommodated there; but they are taking on in the Roderick ward below, and as you will be out by the end of a week, we can put you among the surgical cases. Don't distress yourself about the eye; the other is sound and healthy, and you will be able to get on with only one eye as well as Nelson." Applying something to relieve the pain, he sent him into the Eye ward, telling him that he had better remain there for the present. The Eye ward of the General Hospital was not a "bandaged" one, but remarkably cheerful. It contained thirty beds, disposed in two rows, one row subdivided by the fireplace, the other by a large table decorated with flowers in vases or growing in pots, which took off one's attention from the dressing tins placed upon it. The dark green walls were relieved by coloured pictures from the *Graphic* and *Illustrated London News*, and the sweet singing of a linnet prevented the patients from being depressed by the monotony of sullen silence. Only a few of the patients were in bed. The rest were sitting or standing about, discussing the contents of a newspaper which a patient with eyes nearly cured was reading aloud to a group. Near the fire, two lads, each with an eye bandaged, were playing chess.

AMUSING THEMSELVES IN THE EYE WARD.

A nurse conducted Dyer to a seat near a window overlooking a crowded street, and next to a man lying on a bed with both eyes shaded. Asking Dyer what he was suffering from, he went on to talk about his own case, saying that he had been in the ward for a month owing to injuries received during an accidental explosion of gunpowder. For three weeks of this time both eyes had been bandaged, and he said that he should have been tormented out of his life by anxiety and "nothing to do," but for the amusement he derived and imparted to one or two others by keeping his mind employed with a celebrated system of memory. Having recently learnt it, he was able to repeat in rotation, after another patient had described all the articles in the room, the whole at a stroke; then he recited page after page of the books he heard being read, and by these and other exploits made himself quite a hero. He astonished Dyer by getting him to repeat the names of all the men and foremen at Dudgeon's he could remember. "When I'd done," related Dyer, describing the event afterwards, "he said, 'Now start again and repeat the lot in the same order.' Of course I couldn't, for I didn't know whether I'd put Brown first or Robinson, upon which I'm blest if he didn't gabble the whole lot off in a string, just as I'd said them, though there were more than two hundred, and I'd only said their names once."

THE RODERICK WARD.

About 6 o'clock Dyer was conducted below to the Roderick ward on the lower floor, and was informed that a bed would be at his disposal there till he left. The ward was double the size of the one he had quitted, and held in all sixty beds, separated into two sets of thirty apiece by a broad lobby, containing the kitchen, scullery, dispensary, lavatory, and other offices of the ward, which virtually rendered it two wards of equal dimensions, since, although the gangway ran straight through it from one end to the other without door or partition, the lobby compressed it a little and narrowed the view from each section. The bare boards of the floor were as white and as clean as any trencher in olden times, and were relieved in colour by the red counterpanes on the unvalanced beds, of which there were fourteen on the fireplace side and fifteen on the other. At the back of each bed were blue cotton curtains, so suspended on a half hoop bar as to move easily round and partly enclose the bed, affording the patient privacy if needed, and enabling him to screen himself from the rest of the ward if undesirous of looking out upon that little world of suffering. Suspended from this bar, also, was a sheet of blue paper, foolscap size, containing the name and disease of the patient below, and

[1] For the sake of giving greater weight to the facts in this narrative, the whole of the statistics of the General Hospital are taken from the latest data obtainable at the London Hospital, Whitechapel, the largest of the metropolitan hospitals, having over 700 beds. To have adopted fancy figures, worked out from the data of all the hospitals, would have been to vitiate the value of the statistics; hence, without any intention of invidiously treating the rest, the London Hospital has been selected, being the largest, as the one to furnish the statistics, while the general features of the General Hospital are taken from all the principal hospitals, strict attention being paid to keeping the description well within the mark, and rendering it a practical matter-of-fact account, rather than a picture of the ideal.

particulars as to his treatment and diet. Behind the bed the buff-coloured wall was adorned by rows of beautiful engravings and chromo-lithographs, and at the end of Dyer's section there was a magnificent oil-painting, "Joseph revealing himself to his Brethren," the munificent gift of a benevolent R.A. Beneath this a set of suspending shelves contained a library of forty volumes, the lowest shelf partly hidden by a number of beautiful ferns on a table. A little to the side, singing in the window, was a mule canary, and not far from the warbler was an aquarium full of goldfish, placed in a window recess. Between each bed was a pretty white pine locker, on noiseless wheels, with a cupboard in front for any articles the patient might require to stow away, and a rack behind for his towel and medicine.

THE PATIENTS AND THEIR NURSES.

Expecting to hear groans and lamentations in a surgical ward, Dyer was surprised at the calmness prevailing. Doubtless pain existed in most of the beds, or else that discomfort arising from long lying in one position which is akin to pain; but, generally speaking, the bandaged heads and arms protruding outside the counterpane, and the legs in splints buried beneath it, were quiet enough, and the outward expression of bodily wretchedness was chiefly confined to a twitching of the face, or a slight movement of the bedclothes. There is as much manliness and fortitude displayed in bearing pain in the ward of a hospital as on the field of battle. Dyer soon discovered that the female attendants in the ward, in their cool print dresses and white aprons and dainty white caps, were divided into nurses and probationers—the latter apprentices to the noble craft of nursing; and that supervising both was a Sister, distinguishable from the rest only by long lappets to her cap and by an air of responsibility and authority. Above the probationers, nurses, and sister, was the matron, a buxom lady, with but a slight variation in dress to mark her rank, and who had such a broad bright face, and such a good-humoured smile, that the lowest felt at once at ease in her courteous presence. Her authority was maintained by just the faintest firmness of tone, which never varied, except to level a short, cutting, indignant reproach at any probationer or nurse unusually remiss in her duty. It was not often that this was the case, so firm and vigilant was the sister, and its rarity in the Roderick ward was a matter of frequent commendation on the part of the matron.

SISTER AGATHA.

The sister was young and of attractive appearance, and had entered the hospital as a probationer, working her way up to her present position. She was deeply spiritual, and with that happy unconsciousness of her piety which has so rare a charm in women who devote themselves heart and soul to any stirring sacred mission. In the whole hospital there was no hooded or black-robed devotee of any religious nursing order, and if the rest of the sisters were as devout as Sister Agatha there could have been no need for them. It was Sister Agatha who read the prayers in the ward night and morning, kneeling at a prayer-desk and reading two short prayers in a clear and sonorous voice, then singing, without referring to any music-book, two or three verses of a favourite hymn. The prayer services were obligatory in all the wards; but the singing was a specialty of the Roderick, and when the sun shone in upon the ward and Sister Agatha was singing "Jesus, lover of my soul," in the sweetest of voices, Tom Dyer, the mechanic, fancied that the mule canary listened in prayerful sympathy, and that the gold fish ceased their placid swimming till she had done.

THE WARD AT NIGHT.

At 8 o'clock the gas was turned down, and the ward subsided into quietness for the night. For Dyer there was very little sleep at first. He was in a fright, as you and I would have been, at the coming operation. Then there were thoughts about the future that were not of the brightest—"who would take on a one-eyed chap when even two-eyed mechanics were at a discount?" Afterwards the empty bed at the side worried him: had anybody just died in it? would he himself die? would he be awakened at night by tramping men bringing in, as an occupant, some victim, like himself, of an accident? When a night nurse hurried along the ward he imagined somebody must be dying, and the moans of a poor fellow at the end of the ward—a bird-fancier, whose legs had been smashed by a van—filled him with feelings of distress, which only subsided when the house-surgeon came and did something to alleviate the man's sufferings. At last he fell asleep, and did not awake the next morning until the night nurses were gone, and the probationers were taking round the 7 o'clock breakfast of cocoa, and tea, and other nourishment, varying in individual cases, to the different patients. As he was to be chloroformed at 10 o'clock, the surgeon had left orders that he was to take no breakfast in the morning. While the rest of the patients were having theirs, the scrubbers came to wash the floor, and afterwards there was a general cleaning and tidying of the ward till half-past 9 o'clock, when he dressed, and a ward clerk—a very good natured young fellow, although a regular "masher" in dress—conducted him upstairs to the Eye ward. He did his best to raise Dyer's spirits. Thanks to his friendly words, Dyer entered the waiting-room alongside the operating theatre with a firm and confident tread, and quietly bided the time for the operation.

DYER UNDER CHLOROFORM.

There were several minor operations before Dyer came in and stretched himself full length on the couch, while the assistant-surgeon promptly prepared him for the operation. With equal quickness the house-surgeon placed a square piece of lint in front of the patient's nose, about two inches from it, and began dropping chloroform from a small ounce bottle. This he increased, until the lint became quite saturated; then he removed it, and placed firmly over Dyer's nose a Clover's inhaler, from the bag attached to which the patient drew in deep inspirations of ether. At the outset Dyer manifested a deal of muscular excitement, but gradually it passed off, and he appeared to fall into an uneasy slumber. The house-surgeon on one side kept the inhaler fixed to his nose, watching his face intently, with his finger on his pulse; while the assistant on the other side held the electric light close to the wounded eye, from which the bandage had been removed. "Ready?" demanded the operator. "Ready," replied the house-surgeon. Deftly inserting an extender in the eyelid, which extended the size of the orifice, the operation commenced. At last, after careful dissection, he severed the eye from its connexions, and holding it out on the palm of his hand for the spectators to look at, observed, "The wound went right through; there was no hope for it."

3560 EYE OPERATIONS IN ONE YEAR.

"And so this is the patient who had his eye taken out," remarked, a few minutes later, an old clergyman visitor to the house-surgeon, as they both looked in the doorway of a dark room, where Dyer still lay stretched out on the couch, with a nurse sitting alongside him to watch his recovery from the chloroform. "Who are you looking at?" suddenly demanded Dyer, starting up. "I tell you I'm not going to have my eye out this morning." The nurse pressed him down quietly, and the house-surgeon, remarking that Dyer was "just coming to," led him into the operating theatre, where he showed him the electric light, and explained the uses of the various instruments. "What we do," he said, in course of conversation, "is on a small scale compared with a regular Eye hospital. I was at the London Ophthalmic Hospital, Moorfields, for several years. There they perform, on an average, nearly ten operations regularly every day—3560 in the course of a year. The attendances of out-patients amount to nearly 125,000 a year. The 100 beds there are always full, and they pass through the hospital every year over 2000 patients!" "Dear me!" exclaimed the clergyman. "Yes, and they not only cure poor people's eyes for nothing, but they give away spectacles to such as seamstresses, poor working men, and others, who cannot afford them. On an average, each pair of spectacles costs the hospital 7*s.* 6*d.*, and they gave away nearly £300 worth last year. Then, to those who *can* afford them, they try their eyes, and sell them the spectacles at almost cost price, so that a working man can be sure that he has got the right sort, and is not cheated with inferior spectacles. In a smaller way we do the same thing here, the Samaritan Fund providing for the gift of spectacles to very poor people." "What a very good idea," said the clergyman. "I was thinking of preaching a sermon on the case of the poor man who was married at my church, and I think I shall invite special donations on behalf of this fund." "I thank you, we shall be very grateful. A Samaritan fund appeals to every Christian."

THE EYE SURGEON WHO BECAME BLIND.

"Now, tell me," demanded the clergyman, "didn't you find it trying, having to pass 3500 operations through

your hands every year?—there must have been a great strain on the nervous system." Remembering that during Dyer's operation the house-surgeon was on his knees a quarter of an hour, with his head and eyes within a few inches of the operation, such intense application, continued day after day throughout the year, while living all the while amidst the dejected sufferers of eye diseases, must involve a strain appalling to those whose lives are spent in more pleasant places. "There was a strain," the surgeon admitted, and then he went on to describe the case of a house-surgeon in a great London eye hospital, who, while working thus daily for others, was himself attacked by an incurable eye disease, which in time—a year or two ago—made him blind. Still, in spite of this terrible affliction, he kept at his post to the last, helping cheerfully to save the sight of others while his own was gradually perishing. What an example to those who would stay the course of the universe if they happen to have a cold, or rail at Providence if afflicted for a couple of days with a pimple! Working on, while growing blind, to the last! The annals of every London hospital are full of similar cases of heroism.

AFTER THE OPERATION.

As soon as he had recovered, a little nourishment was given to Dyer, and having received the congratulations of the man with shaded eyes, who, to please him, recited afresh the names of the two hundred men at Dudgeon's, he was conveyed again below to the Roderick ward. The pain arising from the wounded eye had departed with it, and, beyond a slight feeling of soreness, there was nothing now to trouble him. At the recommendation of Sister Agatha he had a nap in bed, and awoke about mid-day in a tolerable mood for his dinner. This was served round to each patient by the probationers and nurses, who flitted right and left from the lobby, and soon supplied each sufferer with his ordinary allowance of roast meat, vegetables, and milk pudding, together with such stimulants as had been specially ordered by the doctor. The ordinary diet was varied by fish, chops and steaks, mutton-broth or beef-tea, and other articles; but in every case it was served up hot and clean, and in a manner to please the most fastidious invalid. After dinner Dyer lay on his bed for hours in that happy, peaceful condition which commonly follows a severe operation if the patient knows that the whole of the worst is behind him, and that in front lies swift and certain recovery. Peace after pain—is there any other peace so beatific as this? Dyer felt as though he had had a fresh lease of happy life conferred upon him, and was encouraged to hope that his speedy recovery might be quickly followed by fresh employment. If Nelson had got on with only one eye, why might not he? At any rate, the wounded eye would trouble him no longer, and in two or three days he would be discharged from the ward, and in the meanwhile it was very pleasant to lie there on his back, lazily watching what was going on. At the worst, the bright, sunny ward was a pleasant contrast to the black and gloomy workshop at Dudgeon's.

THE DEATH OF THE BIRD-FANCIER.

Among other things, he noticed in the afternoon a constant movement towards the bird-fancier's bed at the remote end of the ward. In the morning a piece of felting had been unrolled along the length of the passage-way between the beds, to deaden the sound of the footsteps on the bare white floor. The house-surgeon looked in several times; Sister Agatha kept her gaze constantly in the direction of the bed. As the day wore on, and the sun shone brightly into the ward, the flowers seemed to grow fresher and more beautiful, the pictures on the wall appeared full of animation—one almost expected to hear the British soldiers at Quatre Bras above Dyer's bed shout at the rushing enemy—while the mule canary piped its song shrilly. Thinking the noise might worry the sufferer, Sister Agatha ordered it to be removed to another ward, but a feeble sign from the bed arrested the departure of the songster, and, apparently by request, the cage was placed on a locker alongside the bed, from which a hand was presently extended caressingly. Later on the nurse enfolded the bed with a couple of crimson screens, behind which afterwards disappeared the Chaplain and a rough-headed middle-aged man in a coarse grey tweed suit, who followed the former awkwardly, with a subdued manner evidently foreign to his habitual bearing. "It's the bird-fancier who was brought in last week—run over by a van," said a probationer to Dyer, in reply to an inquiry he put while she was administering to him his medicine. "He is not so well to-day, and his mate is visiting him." "Not so well to-day" is a quiet hospital way of saying that a patient is sinking.

SISTER AGATHA SINGS "ROCK OF AGES."

Tea-time came and passed. The probationers tidied up the ward for the night. Sister Agatha said prayers in the usual course, and Dyer thought that he had never heard anyone sing with such tremulous sweetness "Rock of Ages, cleft for me." She sang softly that night, but every word could be heard in the remotest part of the ward. The nurses and probationers were moved to tears; the matron, who had entered the ward at the second verse, stood motionless and pale by the door; the "masher" ward clerk fidgeted into a shadowy part of the lobby to conceal his discomposure; while, altogether unconscious of the effect she was producing, and thinking only of the dying bird-fancier, Sister Agatha sang on, with a voice trembling with emotion, to the final verse—

> "While I draw my fleeting breath,
> When my eyelids close in death,
> When I soar through tracts unknown,
> See Thee on Thy Judgment Throne,—
> Rock of Ages, cleft for me,
> Let me hide myself in Thee."

As she finished, the mule canary, thrilled by the deep silence that followed, burst afresh into song.

THE BIRD-FANCIER'S BEQUEST.

While the hospital helpers were yet rolling the mortal remains of the bird-fancier along the dim and dismal basement passage to the mortuary, the matron, in passing Dyer's bed, whispered to a nurse, "What do you think the poor man did this afternoon? He bequeathed the whole of his birds to the hospital." The whole of his pets! They were as much to him, though he lived in a Whitechapel slum, as the choicest art treasures are to a connoisseur dwelling in the most sumptuous residence in Kensington. All he loved he gave to the hospital, to gladden and cheer the patients, and as a dying expression of gratitude. In its way, his bequest was as superb as the gift of a gallery of pictures by a dying millionaire.

VISITING DAY.

The next day was Sunday In the afternoon the hospital was flooded by visitors. The moment 3 o'clock had struck they poured up the staircases and along the corridors to the various wards, carrying flowers, toys, and brown-paper packets for the patients. Before long, in every ward the brightness and lightness of the place was broken by black patches—groups of black-dressed people standing by or sitting on the beds; for black is not simply the hue of Sabbatarian decorum and respectability with the toiling masses, but is considered *de rigueur* to the uninitiated in visiting a hospital. Forming their impression of the inside of a hospital from what they see of the gloomy exterior, they prepare themselves for a sort of prison, supervised by sour-faced nurses, and officials ready to pounce upon and suppress any expression of light-heartedness in the shape of a laughing face or highly coloured clothing. It is quite a revelation to them to find gaiety encouraged, brightness made an art by the matron and nurses, and sombre respectability cuttingly disregarded.

THE PATIENTS' HOLIDAY.

Visiting day is the patients' holiday, and it is impossible to go through the wards while the friends are hanging about the beds without feeling that it is enjoyed far more thoroughly than many a holiday outside. The two hours allowed for the carnival are none too long for the eager and animated imparting of the latest family news, and for the discussion of the patient's particular disease or hurt, and the mode of life in the hospital. Here and there a bed may be passed, silent and unvisited. Perhaps the patient has no friends; perhaps they are too poor to visit the sufferer often. In some cases a patient will, if of a cheerful disposition, extract amusement from watching other patients' friends, some of whom, if they have been frequent visitors at the ward, may also, out of good nature and desire to cheer, come and pass a word or two. Other patients, rendered peevish by pain, and naturally of a lacrymose disposition, openly display their disappointment at being left deserted and solitary amidst so much animation; and it is here that a sister or a nurse, flitting about a ward, may render the service of a good angel in pausing for a few minutes to cheer the sufferer by a timely chat.

VISITING THE UNVISITED.

In some of our London hospitals there is a touching tradition of a great-hearted man, who used to devote his time to visiting the unvisited patients. Unostentatiously he passed through the wards, and whenever he saw a solitary patient who seemed sad and forlorn, he would sit down and talk till he had brightened up the sufferer; and then, leaving a newspaper, or a magazine, or a book behind to continue his cheering influence after he was gone, he would pass on to someone else in want of consolation. He never "talked religion," although his conversation showed him to possess deep spiritual feeling, and he never gave away tracts; his equipment consisting of a kind tongue and a bundle of Sunday magazines, or, if on week-days, some evening newspapers, together with a reserve of a few new books, which he carried in his pockets. In many of the hospitals even his name was unknown. He called himself, jokingly, Mr. Jones, or Smith, or Robinson, when requested to give a name, and repressed further inquiries by a trifling contribution to the hospital funds. Who he really was, and where he came from, remained unknown to the end. The officials he rarely talked to if he could avoid it, and as soon as his mission was understood they allowed him to roam through the wards unmolested. For nearly two years his visits regularly lasted, and then suddenly ceased, probably through the death of this kind-hearted, unassuming Samaritan. His mission died with him, but may it not have been more glorious while it lasted than many a Press-puffed pretentious piece of charity?

A DEPUTATION FROM DUDGEON'S.

Dyer was not among the unlucky ones. He had not only his wife and daughter to cheer him, but also that good-for-nothing Jack Brown, who, with another man and a foreman, appeared as delegates from Dudgeon's to visit him on behalf of his fellow-workmen. These rough and sturdy fellows, who shouted lustily enough their workshop jokes, and had made their voices heard at many a political meeting at Poplar, fidgeted about by the bedside, and kept talking about subjects different from that they had come expressly about, until Mrs. Dyer, after many hints and nudges, goaded Jack Brown into saying, "Well, Dyer, old chap, we come to tell you——." Then suddenly stopping, he said, "Here, missis, you must tell him the rest." Stooping to kiss him, his wife ejaculated tearfully that the day before, hearing he had lost his eye, the men at the works had started a subscription, which had resulted in £9 12*s.* 4*d.* being collected on his behalf. "It is not much," said the foreman, apologetically, "but it will keep your mind easy for a few weeks, and then something else may turn up to help you along."

PRESENTS FOR THE WARDS.

After a little talk the men began admiring the ward. "Roderick" was quite brilliant that afternoon. Most of the visitors had brought bunches of flowers, and several of them flowers in pots. The gold fish maintained a constant chase after one another in the aquarium, stimulated by the fountain playing blithely overhead, while the mule canary trilled in the corner, provoking many a glance of admiration from the patients' friends. "If I had thought they'd been acceptable," said the foreman, "I would have invested in a flower or two for the ward. Yesterday, outside Dudgeon's gate, they were selling big flowering geraniums to the men at fourpence a pot, and some fuchsias, like a tree—as much as you could carry home—for ninepence or a shilling. One of those would have looked well in the ward, if one had known it." "If one had known it," repeated the Chaplain, who, in passing through "Roderick," had seen the men casting admiring glances along the ward and had overheard the words of the foreman. "You see now how much good remains undone through ignorance. The hospital is always thinking of you, and preparing for you; you may be struck down at any moment and be brought here. Now, how often do you think, in return, of the hospital?"

GOOD ADVICE FOR EVERYONE.

"To tell the truth," said the foreman, "I've never thought about it at all. I hope I never may have to attend one." "I hope so too," rejoined the chaplain, "for your sake; but you're not sure. An accident occurs only now and again, you may say, but the number soon mounts up. At this hospital alone we dealt with over 8000 last year. Here are the figures—1572 fractures, 3491 wounds, 1126 contusions, 185 sprains, 171 dislocations, 761 burns and scalds, 94 cases of hernia, 34 dog-bites, 107 cases of hæmorrhage, 72 cases of retention, 34 of foreign bodies in the throat &c., 860 cases of inflammation from injuries, and about 200 various, making a total of 8707. Of that number, 2000 all but 8 were brought into the hospital, and provided with the same comfort and care as your friend lying there. Is not that a tremendous number for a single hospital? Yet that is the way the hospitals keep working for you throughout the year in every district in London—not all to the same extent as this, but invariably working to the full stretch of their powers."

£50,000 A YEAR TO MAKE UP.

"It must cost something to keep them all going," said the foreman. "Yes, and being mainly dependent on voluntary subscriptions, the hospitals have a hard struggle to rub along. Our fixed income is only £15,000 a year, and we have to make up nearly £50,000 a year." "I suppose you get a good many legacies, sir," observed the foreman. "Not so many as the wealth of London might lead you to think; but you must know that it is not the £100 bequests that keep a hospital going—it is the sixpences, the shillings, and the half-crowns of the general public, together with the guineas of annual subscribers. From you who toil we look for an occasional subscription, not as a matter of charity, but out of common fairness. When you take a ticket for a long journey, the railway clerk often says to you, 'Will you insure yourself against accidents? For a penny or twopence you can insure so much a week in the event of being hurt.' Now, each in-patient costs, on an average, nearly 3*s.* 3*d.* a day, or 26*s.* a week, including the maintenance of the hospital. We're spending at that rate on your friend lying there, and we may be spending it on you to-morrow or some future time. You are ready enough to spend twopence to insure the receipt of a few shillings a week in going on a single long journey. Now, here is a sum of 26*s.* a week which the hospital stands committed to spend on you if you are brought into its wards injured and helpless. Don't you think, therefore, that in common fairness you ought to pay something in the shape of insurance money in return? A shilling a year on Hospital Sunday, is surely not too much for every working man to subscribe to keep up hospitals which are ready to spend nearly £70 a year to cure him if he is brought into their wards injured or ill. Why, my good friends, if you were on a platform, and a man fell under the carriages and was terribly mangled, and another man, bursting through the crowd as they bore him away, were to exclaim, 'Here is a purse with £20; spend all on him to cure him; and if he wants more, there is a blank cheque for the remainder.' If a man did that, the crowd would cheer him out of the station. Yet the hospital is doing that every day; and instead of cheering, the public, with sighs, fill up the bags on Hospital Sunday with coppers and threepenny-pieces. Isn't that so? The hospital gives ungrudging aid all the year round—365 days; the public find it hard to give grudgingly only once—on Hospital Sunday."

NOT CHARITY, BUT SELF-INTEREST.

Observing that the group looked a little abashed, the chaplain placed his hand good-humouredly on the foreman's shoulder, and exclaimed, "Well, if I go on at this rate, you will complain that I am preaching a sermon. You came here to cheer up your friend, not to be lectured; so don't let me spoil your chat any further. But remember this, when you are asked to subscribe to the Hospital Sunday Fund, don't say to yourself, 'I am giving a shilling out of charity,' but rather, 'I am giving a shilling to ensure that, if I get injured during the year, I shall find awaiting me a well-organised hospital, a comfortable ward, a soft bed, the kindest of nurses and doctors, and a managing staff determined to begrudge no expense, and to do the utmost in their power to make a whole man of me again, and restore me in good health to my family.' That's the view I want you to take of it—not charity, but self-interest, and common fairness between man and man. Good-bye!" Shaking hands with them, he passed on, but returned before he had gone many steps, and said to the foreman, "That was a very kind idea of yours, wishing to bring a big fuchsia to the hospital. Now, some of these days, when you can spare a nice potted flower from your garden, and are passing this way, it would be in this case charity, not self-interest, to leave it at the lodge, addressed to the house governor, to be placed in one of the wards. Look how bright the kindness of people has made this ward; the humblest can help, with a picture or a

flower, to keep it bright and cheerful for our sufferers." "Ay, ay, sir, I'll bring a beauty next Sunday," exclaimed the foreman earnestly. "Tom won't be here, then," said Mrs. Dyer, as the Chaplain walked away. "He's to be out on Tuesday or Wednesday." "Then I tell you what, old man," declared the foreman, addressing Tom Dyer, "you and I will come together if the missis will let us, and we'll put on the table a couple of big fuchsias that will make it look like a flower-show."

HE WASN'T IN "LLOYD'S."

As the Chaplain proceeded along the ward, a patient in one of the beds angrily tore a newspaper in halves and threw it on the floor. Picking it up, he said to the man, "You seem annoyed with something in this paper?" "No, sir, it's not what's in it but what isn't in it that annoys me. I fell from a scaffold forty feet yesterday and broke a leg, and they haven't put it in 'yesterday's summary,' yet they've been and gone and put in another man who only fell twenty feet and only broke his collar-bone. I've taken in *Lloyd's* regular every Sunday for twenty years. Do you think that's fair?" "Well, I don't know," replied the Chaplain, good-humouredly, "but I don't think the paper's to blame. If you'll let me have it, I'll patch it up and send it back to the ward to-morrow—the other patients might like to read it. Good afternoon—I see I am wanted at the end." *Lloyd's* publishes every Sunday a column of horrors, detailing the accidents of the day before. It is not very agreeable reading, but the masses like it, and when a regular reader gets injured on a Saturday he is often, if sufficiently recovered, as impatient to see if his name is in "yesterday's summary" as a fashionable lady is to see the notice of her party or her grand dinner in the columns of the *Morning Post*.

SMUGGLING BRANDY INTO THE WARD.

The reason the Chaplain hurried away was because his roving eye had detected a visitor surreptitiously slipping a bottle under the counterpane of a bed at the end of the ward. The introduction of liquor into the wards of a hospital is strictly prohibited, and in the event of detection the visitor is immediately expelled, and the repetition of the offence leads to the expulsion of the patient if in a removable condition. In spite of this necessary rigour, patients' friends, from a mistaken feeling of kindness, persist in trying to evade the regulation, and it was to prevent any trouble occurring that the Chaplain himself took the present case in hand. Walking carelessly up to the bed, and placing himself between the visitor and the patient, he made a few commonplace remarks, and then, passing his hand casually across the counterpane as if to smooth it, exposed one end of the flask to the discomfited couple. Covering it over again, he said to the patient's friend, "What is it—brandy or whisky?" "Brandy. I——."

A DONATION IN KIND.

"Quite so, quite so; I don't want any explanation," interposed the Chaplain, fearing the man's excuses might result in a strain on the truth. "It was kindly feeling that made you bring that into the place, and there need be no disguise about the matter. The hospital prefers, if possible, to receive donations in cash, but it does not object to presents in kind; and if you will, as I know you will, present the flask of brandy to the Sister, she will be very glad to add it to the stores of the hospital. In this place we include brandy with the drugs, and the doctor stints no one spirits, wine, or beer, if he considers stimulants essential. Last year we spent over £400 on spirits, over £100 on wine, £350 on beer, and £2700 on milk. A part of the beer goes as 'diet,' the rest is issued as medicine; but the whole of the liquor is consumed by the patients only. So you see we are not stingy to the inmates. And having so much to buy, we are always grateful when a rich man bequeaths us his wine-cellar for the use of the patients, or when we get even what you might think the trifling donation of a flask of spirits. This, I suppose," removing the flask from its place and measuring its contents with a critical look, "cost a shilling. Now, tell me, why is it that people like you hesitate to give a shilling to hospitals once a year, and yet do not mind spending a shilling on a present of this kind when you visit a patient?"

CONVERTING AN EVIL-DOER INTO A BENEFACTOR.

Beckoning to Sister Agatha as she passed, he placed the flask in her hands, and said, "This kind person did not know what to bring to cheer his comrade in bed, and made a desperate guess at brandy, which is supplied by the hospital. He hopes you will kindly look on it as a donation, and I think I am correct in suggesting that if he wanted to bring anything another time, you would be very glad of an illustrated paper, or a book, or a set of draughts, to cheer up his friend during his stay in this place." "Most certainly," replied Sister Agatha, with a smile. "Many thanks for this." And as she went off to her room with the confiscated flask, the Chaplain continued, with a pleasant smile, "It is so easy to impart pleasure with a little thoughtfulness. Now your shilling, handed to the Sister, would have kept your friend regularly supplied with the daily paper for a fortnight, and when he had finished with it every day, it would have given pleasure in the afternoon and evening to the other patients in the ward. How much more pleasure that would have been than a few nips of brandy, which might have thrown your friend back, and perhaps killed him. But never mind, you meant well, and if you will take my advice, next time you wish to cheer a friend in hospital consult the Sister, and you will be astonished at her wonderful knowledge of the ways to do it, at a far less cost than your flask of brandy." Having thus put them at their ease, the Chaplain nodded a good-humoured farewell, and quitted the ward.

THE EMPTY BED IS FILLED.

Dyer fell asleep directly after supper, and he did not break clear of the doze until midnight. He then observed, while tossing about, trying to get asleep again, that the vacant bed by his side had at last found an occupant. Throughout the night the new-comer was constantly visited by the nurse on duty, and during one of the later inspections towards the morning, Dyer overheard her say to a probationer that the sleeping man had met with an accident on the Underground Railway the night before, having slipped between the train and the platform while alighting from the carriage, and sustained a fracture of the arm and some bruises. One of the latter had evidently been accompanied by a laceration or a cut, as the patient's right cheek was striped with a piece of plaster. Twisting himself round, in order to bring his remaining eye to bear more completely on his neighbour, Dyer started, stared, and ejaculated involuntarily, "Why, I'm blest if it isn't the old governor!" "Who?" demanded the nurse. "What's his name?" exclaimed Dyer, excitedly, in reply. "Dudgeon," answered the nurse, examining the invalid's passport, suspended over his head.

DIVES IN THE RODERICK WARD.

"I thought I wasn't mistaken," said Dyer; "that's my old master—Dudgeon—who used to own Dudgeon's Works and sold it to a company. What's he doing here? He was in Italy when we heard from him last. Well, I *am* blest, to think——" "Hush!" interposed the nurse; "you will wake him if you talk too loud. Just tell me quietly who he is, and we'll communicate with his friends. We knew he was a gentleman by his clothing when he was brought here last night, but he had no card-case in his pocket and we took his name from his linen." After that, you may be sure Dyer had very little sleep. It was a revelation to him to find that the rich found their way into hospitals as well as the poor. "I thought they only subscribed to them for us chaps, he said to himself; "but it seems that they want the hospital at times as much as we do." Then he tried to imagine what Dudgeon would say and do when he woke up, and found himself lying in bed a few yards from one of his old workmen, and whether the liveried butler and footmen would be allowed to come and wait upon him in the ward, and what the hospital generally would do when it found that it had such a distinguished man as Dudgeon within its walls. "Why, if he liked," whispered Dyer to the nurse, "he could keep this whole place going himself, and still have enough a year to live on in Mortgramit Square!"

NEARLY DECAPITATED ON THE RAILWAY.

When Sister Agatha put away the prayer-book after morning prayers on the library shelf, alongside "King's Solomon's Mines" and "Treasure Island," and returned in the direction of her room, Dudgeon beckoned to her, and said, "How very nice! Kindly thank the nurses who took charge of me last night; and accept my own thanks for the hymn you sang so sweetly. More than anyone, I should be grateful this morning for my marvellous escape last night." "Was it so remarkable as that?" asked Sister Agatha. "Quite astonishing. I thought the train had stopped, and fell as I alighted, first on the platform and then between

a couple of carriages. Somehow my head got on the line and the wheel rolled on till it pinned the nape to the metal; then it stopped; an inch more and I must have been decapitated. As it was, I was jammed so tight between the wheel and the rail that they had some trouble in getting my head out. The suspense was awful, and I can just remember being placed on the platform, and then must have become insensible, for my arm was being put in a splint by your surgeon when I came to again." "God was very merciful!" "And man merciful too; for when I was brought here everything was lying ready to receive me, and I was examined, mended, and put to bed as promptly and with as much kindness and consideration as my own family could have shown me. I presume you treat all alike in this hospital—the patients in this ward were all treated like me?" "All of them. In the General Hospital no difference is made between rich and poor; and the coalheaver who is brought crushed and bleeding is treated just the same as any gentleman knocked down by a cab. We make no difference between master and man; but of that you can judge for yourself. In the next bed is one of your own workmen, who has been here several days. He will be the best authority in this matter. But you had better remain quiet until the surgeon comes round, and I would advise no more talking till then. Is there anything I can do for you in the meantime?" "Nothing, except to request the House-Governor to pay me a visit at his convenience."

ARE WE NOT ALL LIKE DUDGEON?

When the House-Governor came up later, Dudgeon said to him, "I am much obliged to you for your kindness in receiving me here last night, and putting this left arm of mine into gear. I certainly never thought I should some day spend a night in a hospital. That's an Irish way of putting it, but you know what I mean." "Most people say the same thing, but none the less I hope you are not disenchanted." "Disenchanted! My dear sir, it would be shocking ingratitude to find fault with anything in this place, especially as I can't remember ever contributing anything to its funds. Of course, that omission will have to be rectified now—we can talk about that to-morrow. What I want you to be so good to do at present is, to send a messenger to 15, Mortgramit Square, and tell my valet to come here. Manage it so that no alarm is created, and nobody else comes with him. My wife and family do not arrive home till to-morrow night; and there is no need of acquainting anyone else with the accident." "Except that it is in the *Morning Post* this morning, and other daily papers." "Confound the *Morning Post*. Who put it in?" "I don't know; reporters are always prowling about, and picking up news." "Well, you'll have to bear the brunt. I am not going to see anyone to-day or to-morrow till I go home, so you must send them away. Confound the *Post*, to alarm my friends like that! I won't take it in any more." "People are hard to please," said Sister Agatha, smiling. "Here, yesterday, in this ward, a patient vowed he wouldn't take in *Lloyd's* any more, because his accident wasn't reported; and to-day another vows he won't take in the *Post* any more, because his accident is reported. It must be rather difficult for the Press to please everybody." They all laughed at this, and Dudgeon as good-humouredly as the rest. Observing then that Dyer was dressing, the surgeon having advised him to get up, Dudgeon asked Sister Agatha to tell him to come to him.

MASTER AND MAN.

"Well, my man," commenced Dudgeon, your face is familiar to me? Where were you employed in my works?" "In the fitting shop; my father, John Dyer, was there as leading hand, twenty years before me." "I remember him well. A thoroughly honest man, who did his work well down to the day of his death. And you are his son, eh? Well, and how did you meet with your accident?" At the end of Dyer's narrative, Dudgeon said, "I had heard they were upsetting the Works and discharging the old hands without mercy, and had come back to set matters to rights. I was to have paid the Works a first visit this morning. Being the largest shareholder, besides a director, I have still a voice in the concern, and when I get well I will see what can be done for you. A man who has worked all his life for a firm, as well as his father, has a claim for consideration which a master cannot ignore if a company can, particularly when he loses his eye at his work. So set your mind at rest about the future, and tell me how they have treated you in the hospital." "Me? They've treated me well enough. It's you, sir, I'm afraid they haven't treated with enough distinction. The fact is, they don't realise who you are." "Don't they?" said Dudgeon, good-humouredly, amused at the mechanic's anxiety on his behalf. "Considering the shabby way I treated them when I was well, I think they have heaped coals of fire upon my head sufficiently. To introduce distinctions would be to disorganise the ward. Observe how smoothly everything works in this place. All these poor fellows are more in want of attention than myself. I am leaving to-morrow. To me nothing is more pleasing than to see that social equality prevails in a ward, and that suffering is the only distinction that invites additional deference."

A REGULAR PIECE OF ENGINEERING.

Disabused of his idea that a slight had been cast upon Dudgeon, Dyer the mechanic launched out in praises of the institution. "Everything is clean and sweet, and seems to go like clockwork. They bring a man in dreadfully injured; the surgeon takes a sight at him, sir, as you or I would at a bit of iron, and then they all go to work washing and cleaning, coiling him up here, and padding him there, and then they fix his limbs in iron frames or wooden splints, and when at last they stow him under the sheets he's a regular piece of engineering. They take in, on an average, twenty-four accidents a day, Sunday and week-day, all the year round, and three of those are broken bones that need setting. Sometimes, the accidents mount up to sixty a day, and on a frosty night as many as nine broken legs will be brought into the place between midnight and six in the morning. Down below, I heard a man say, they've got a cellar chock-full of splints, and they order them in, sir, by the hundred."

DUDGEON AND DYER INSPECT THE WARD.

The next morning both Dudgeon and Dyer were up betimes, and, after the surgeon's inspection, prepared to leave the ward. While waiting for the House-Governor to arrive to show them over the building, he having willingly consented the night before, the two made a more thorough inspection of the ward, Sister Agatha acting as guide. There were the different kinds of beds for mitigating the rigour of lying long in one posture; the rests to ease the back or support the feet; the surgical apparatus for severe fractures; the mirrors at the back of the beds on the dark side of the ward to reflect the light on the patient's book or newspaper while reading; the surgical table on noiseless wheels, ready to be quietly rolled to any bedside while dressing or redressing a wound or a fracture; the stores of antiseptic appliances; and the special utensils devised for promoting the patient's comfort, and tiding him over periods of helplessness. Then there were the horizontal flues to point out, sucking away the vitiated atmosphere, and the ventilating apparatus drawing in and warming the fresh air; then the surgeon's druggery—like a miniature doctor's shop—to describe; then the lobby, with its blazing fire and steaming kettle, its huge white table for distributing the patients' food; its rows of plates and dishes, and cheerful array of crockery on the walls; the scullery at the side, with the scullery-maids hard at work; the lifts to bring the food from the kitchen to the ward, and the drugs to the surgeon; and outside the ward the shoot to carry away, at a stroke, all the dirty linen placed in it by the probationers. Finally, in a corner of the ward was the Sister's day-room—quite a little bower of elegance and beauty; no waste of hospital funds on grand and imposing furniture, but an individual lavishing of occasional leisure moments on a thousand and one trifles, which had converted the little square compartment composing the sister's room into a most charming retreat.

A TRIUMPH OF HOSPITAL PROGRESS.

Dudgeon was still making some complimentary remarks about Sister Agatha's sanctum, when the House-Governor appeared at the door. For forty years, he told Dudgeon and Dyer, as they walked away along the corridor, he had lived inside the hospital—first as assistant-secretary, then as secretary, and finally (for fifteen years) in charge of his present duties. He was a man of broad and enlightened views, and to improve his own organisation had directed so much attention to the arrangement and progress of other hospitals that he was quite a mine of knowledge on the subject. While taking them through two or three more of the surgical wards, all more or less of the same stamp as the Roderick, he had much to say of the amazing saving of life in hospitals which had been brought about by

the antiseptic methods of a great Professor of Surgery. "When I came here first the average mortality from the amputation cases was 30 per cent.—in some hospitals it was 40,—in spite of all the care and skill we could command at that time. Things were no better when I became House-Governor fifteen years ago. Then came the Professor, with his wonderful ideas of the germ theory of disease, and his ingenious methods of securing the absolute purity of the surfaces of wounds. The moment we adopted his system the mortality began to decrease, and some of the hospitals brought it down last year to 3 per cent.

HEROES AT HOME AS WELL AS ABROAD.

"It seems to me," said Dudgeon, when the House-Governor had finished dilating on the revolution accomplished by this great Professor of Surgery, and the hundreds of thousands of lives saved throughout the world since the hospitals adopted the system, "that a little of the raving bestowed upon the French *savant* might be worthily bestowed at home." "Quite so, and without any prejudice to the Frenchman, whom we can all admire just the same. In 1884 the Queen made the Professor a baronet for the good his discoveries had done, but isn't it a proof of the general lack of appreciation of medical science in this country, that he should not have been elevated at a stroke to the peerage? If ever you come in contact with those who have anything to do with the bestowing of titles" (addressing Dudgeon), "I hope you may have an opportunity of asking this question—Oughtn't a man who by study and hard work saves a hundred thousand lives by a great discovery, to have as much claim to a peerage as a man who by a great campaign kills half as many more?"

THE MEDICAL WARDS.

"Well, now you've seen enough of the surgical wards," he continued, as they quitted the fourth. "Let me now show you the medical ones. There are no essential differences between the two; the arrangements are exactly the same, but you will at once detect the different aspect of the patients. In the surgical wards there is not so much deathly paleness, because, apart from their wounds, the patients are healthy enough when they are brought here." Beyond this Dudgeon and Dyer saw little to note, and having passed through a couple of the men's wards, they proceeded to visit the women's, which were arranged exactly the same, and possessed similar characteristics as to roominess, brightness, and cheerfulness. Everywhere they found the print-dressed, aproned nurses and probationers busily tending the patients, the Sister, scarcely differing from them in attire, directing everything unobtrusively; and everywhere the same easy-working system, indicating the smoothness that comes from constant practice, coupled with careful organisation of details—everywhere an utter absence of officialism, and yet the constant presence of a kindly discipline.

THE CANCER WARD.

"Before going downstairs to the basement, there is one special department I should like to show you," said the House-Governor, "it is specially devoted to cases of cancer. The disease, when it reaches a certain stage, is practically incurable, and for want of room the hospitals have to reject incurable cases. We, however, differ from the rest in having three wards set apart for the reception of these incurable cases, with beds for thirty-five female patients. Twenty years ago the sum of £4000 was given anonymously to fit up a ward, and two other persons have helped to establish two more since. We take the poor creatures in, and we keep them till they die."[2] "Is that usually long?" asked Dudgeon. "Roughly, a year or two; though some remain years in the refuge. Their diet is quite unlimited; anything the physician may order to tempt their appetite, or to alleviate their pain, is obtained at once without question. If we cannot cure, we do our utmost to reduce the pain to a minimum."

A SCENE OF HUMAN MISERY.

Dudgeon was painfully impressed by the refuge. The wards were bright, and arranged the same as the rest, but being small and connected with one another, and containing chairs and tables and couches, as well as the regulation bed, the place had more the aspect of a home. Some of the inmates were up, and reading or sewing; some were sitting in bed; some were buried in their pillows—bandaged arms, or breasts, or the puffy condition of the lower part of the counterpane indicating where the disease had attacked the body. But, except in one or two cases, there were traces of recent or present pain on the pale faces of the women, which Dudgeon could not drive from his memory for many a day; and one poor creature, the whole of whose head and face was bandaged, and who lay back in bed like a whitened mummy, so shocked his sensibilities that he hurried out of the place, and begged the House-Governor to kindly show him no more such sights. "It makes me ill to see such misery."

WILL YOU HELP TO MITIGATE IT?

"Ah," said the House-Governor. "But what about us, who have this anguish brought to our doors every day, and have to send it away unrelieved because our funds are so limited? That is far more shocking. These thirty-five patients are only a sample of the incurable cancer cases of the metropolis. Imagine hundreds of others unrelieved in squalid homes! We have not a single bed to spare for men with cancers." "It is dreadful—really too dreadful. Can't they find a cure for the disease?" "Medical research is doing its utmost, and in this refuge the physicians are always studying and striving to discover a cure. Here you will see the interest the rich have in generously supporting the hospital. Isolated cases in a West-end square cannot have the research brought to bear upon them that is possible in a cancer ward full of poor people, and it may be that in this poor people's ward the discovery may be gradually elaborated which shall save the life of the richest man, or sooth the anguish of his wife and daughter. I hope, sir, you won't think I am talking *at* you, who are rich, and that I mean to pounce on your purse directly; but I want you rich people, as well as this good man here, who represents the working masses, to take the hospital on its fair merits, and not make it merely a question of charity to give to its funds. I like our chaplain for that; when he gets into the pulpit to preach a hospital sermon, he always tells the people that it is not charity but self-interest that should impel them to be liberal subscribers."

IS THIS NOT TRUE?

"I begin to think," said Dudgeon, "that there exists a good deal of misconception about hospitals. The poor think the pounds of the rich keep them going, and the rich think the pence of the poor keep them going, and between the two the hospitals run short of funds and have a bad time of it." By this time they had reached a door with the inscription "Obstetric Ward." "This is the section," observed the House-Governor, stopping, "devoted to the diseases incidental to women. There was nothing very special to note in the Obstetric ward; and, having briefly pointed out the kitchen and lavatory and druggery attached, the House-Governor paused before a separate room containing a couple of beds. "Ovariotomy cases," he observed to Dudgeon, who laconically translated his meaning to Dyer in the plainer word "tumours." "Here is another triumph of surgery," he continued, as he led them along a short corridor to a large light room with an operating bed in the middle, extensive lavatory arrangements against the wall, and a variety of cases evidently containing surgical instruments and appliances.

THE TRIUMPHS OF OVARIOTOMY.

"This is the operating theatre," said the House-Governor. "We are having it thoroughly purified after an ovariotomy case. Now, when I first came here, and for many years after, ovariotomy almost invariably ended in death. Sometimes we succeeded, but we mostly failed; and the majority of women preferred to live a little longer and die of the disease, rather than to run the risk of an operation, with the odds against them." "My poor mother died of that," observed Dudgeon. "We had the advice of the most famous physicians of the day, but, as you say, the odds were so great that she preferred putting it off until the tumour killed her." "Then you know all about the work of a late President of the College of Surgeons?" said the House-Governor. "I've heard of him by name, and met him once at a dinner; but beyond that he is a great surgeon, I can't say I know anything particular about him." "Then you must listen to this, because it will show you how a great cure may come out of a poor little hospital."

A GREAT CURE OUT OF A POOR LITTLE HOSPITAL.

"Thirty years ago this surgeon became associated with two or three other doctors in developing a Woman's Free Hospital, an institution started in a small way for the treat-

[2] This Cancer Establishment is a special feature of the Middlesex Hospital.

ment of the ordinary diseases of women and children, but which had broken down and was hardly worth any physician belonging to. Among the women who came were some with these huge internal tumours, and this gentleman, distressed at having to send them away, begged his colleagues to let him receive some ovarian cases. He was convinced that by improved methods the body could be opened, and the tumours removed with greater success than was conceived to be possible at the time. At first they would not hear of it. A few fatal cases would ruin the hospital. The consulting physician was so angry at the idea that he even denounced it in public. Then the coroner sent in word to say that if ovariotomy were practised he should hold an inquest on every fatal case. So the surgeon I have named, you see, was in a regular predicament. He was opposed in the hospital for once—it is not often that is the case,—he was opposed outside, and he would have been ruined professionally if he had failed. Still there were these poor women beseeching him for aid, or, like your poor mother, dying a lingering death after years of discomfort, and he decided to risk everything and save them."

HE DECIDES TO SAVE THEM.

"Bravo!" exclaimed Dyer, quite excited. "In 1858," continued the House-Governor, "they agreed to let him try his hand with three. He succeeded in all. Then he succeeded again and again, and that wretched little Woman's Hospital became for the moment the most famous in London, and the training school of all the world. Now, look at the operation. The patient has to be placed on this bed and chloroformed, and then, with the utmost tenderness and decency, the body is cut open, the tumour and ovary cut right out, and then the body is sewn up again. Working as hard as the operator can, the operation takes half an hour, sometimes almost an hour, and then the patient has to be very carefully conveyed back to the ward, and to receive the most assiduous nursing for a couple of months."

WHO WOULD NOT HELP TO PROMOTE SUCH TRIUMPHS?

"And is the cure perfect?" inquired Dudgeon. "Invariably. A patient arrives too unwieldy to walk, and miserably ill; she leaves so thoroughly cured that, except in rare cases, where there may be, say, cancer or some other disease tacked on to it, the probability is that she may never be attacked by a tumour any more. A very large number of cases come from the country. We had one the other day. A woman came from the north so bulky from a tumour that she could not sit during the railway journey, but had to remain on her knees. It was a very bad case, but we cured her. When she went back, her friends and neighbours, who never thought to see her again, and wouldn't believe she was cured, were indeed delighted." "And my poor mother," exclaimed Dudgeon, "with all her wealth, had to perish!" "Do you find them very grateful?" asked Dyer. "Grateful," said the House-Governor, with moistened eyes. "You can't estimate what gratitude is until you see some poor woman, the mother of a family she doesn't want to die and leave, come to this place thinking herself doomed, and leaving here with a long and happy life before her. Of course," he added, "success was not won at a stroke—few successes are. At the outset about one in four died, then one in five, then one in seven, ten, fifteen, and now they have reduced it to nearly one in twenty. One hospital is now devoted almost wholly to ovariotomy, and last year there were only six cases of death out of a hundred. They've done there thirty-eight consecutive cases without a single death. Isn't that grand?"

A MORAL FOR US ALL.

"So your moral is," remarked Dudgeon, "that out of that hospital, to which perhaps my poor mother may have given a trifling donation or two, there sprang a cure which might have saved her life had she lived a little longer?" "Quite so. The hospital cry is, 'Equip me with more funds, that I may be able to devise methods of curing others to-day, which may save your own life to-morrow.' Ovariotomy is a heavy drag on the hospital. Every case costs us at least £10. The usual private fee of a skilled ovariotomist of repute is 100 guineas. If reduced to meet a scanty purse to ten or twenty guineas, the cost of nursing is so heavy, and good nursing is so essential, that, except with well-to-do people, the doctors mostly recommend the hospital. Now, here, as you see, is the best of nursing; and you may not know it, but, when a case has been at all serious, I have known a fashionable surgeon, after spending all day attending patients in the West-end, come down here at night, and spend the whole night in the ward, to watch, without a penny of payment, over the wife of a costermonger."

THE HOSPITAL KITCHEN.

"But," he exclaimed, springing to his feet, "I have talked enough about this operation, and we'll go down now to the kitchen. We shall just catch them serving the dinner up." Descending to the basement by a lift used for conveying the patients to the different stories, Dudgeon and Dyer followed the House-Governor along a passage to a huge room, with walls and ceiling covered with white tiles to admit of ready cleansing. "All the cooking is done by gas and steam," observed the House-Governor, "and it saves an immense amount of labour. The system is this. Every afternoon the sisters collect the diet sheets of each patient, and transmit them to the steward's office, where the clerks make out a gross list of the food required, and order it in. In the morning supplementary lists are made of any fresh diets ordered during the night, and then the cook goes to work. A few hands are drafted in, who get the food ready; and a few porters are now coming in to help transmit it to the wards; but, apart from this, all the work in the kitchen is done by one cook, and a kitchen and scullery maid. It is now half-past eleven, and the food is going up into the wards. We send it in the gross, and in each ward it is divided and distributed in the lobby. On this table are trays of fish, plaice, and soles beautifully brown; here is boiled plaice; and there are the hot water boxes to hold the food. The cook refers to his list: so many diets of plaice to Roderick ward; he puts them in the box, shuts down the lid, the porter puts it on a trolly, and off it goes with other boxes to the lift. In a minute or two it will reach the ward as hot as it left here, and the probationers and nurses will be ready to serve it out to the patients."

SERVING UP THE DINNERS.

"To-day is leg-of-mutton day. Forty or more legs of mutton are fixed inside the iron frame of this trolly, lowered by a lift into a safe, whence, after a couple of hours, they return baked a beautiful brown colour. On the table a porter places the lot, and the cook weighs so much for each ward, cutting up a leg now and again to make up the requisite quantity. Here are the trays of chops—we cook seventy or eighty every day. There in that steam chest are nets of potatoes, each containing the quantity ordered for each ward. Those ovens beyond are full of milk puddings—sago, tapioca, and so forth. The dishes are marked, so as to enable the pudding to be easily carved into diets. The coppers at the side are full of beef-tea. One sort consists of 8 oz. of beef to the pint, another 16 oz., and we have also some extract for special cases, 3 lb. to the pint. Every pint of the last costs half-a-crown." "You must consume a tremendous amount of food every year," said Dyer. "Surprising," answered the House-Governor. "We spent last year £1200 on bread, £2700 on milk, and £6000 on meat. We used about a quarter of a million of eggs, costing nearly £1000. Butter and cheese cost another £1000; vegetables £700, grocery £550, and fish £570. Altogether, including gas and firing, the kitchen cost us nearly £15,000." From the kitchen the party made their way into the laundry, where, amidst the steam, the House-Governor explained the process by which the linen arriving by the shoots from the wards was soaked, steamed, rinsed, and wrung by machinery, and then passed on to capacious drying ovens adjoining the ironing room. "Every week we wash from 5000 to 7000 sheets, and 300 or 400 blankets," he observed; "and from that coal-cellar there, at the end of the passage, about seven tons of coal have to be carried and distributed by porters in the various wards every winter's morning. It's a nasty job, taking them over two hours; but open fires are so wholesome and cheerful, that we're bound to have them in all the wards."

£5000 A YEAR ON MEDICINE.

Ascending to the ground floor, the House-Governor took them into the Dispensary, which seemed like a score of chemists' shops rolled into one, and every bottle and drug case proportionately amplified. "This dispensary costs us, without wages, over £5000 a year," said he. "Nearly £3500 is spent on drugs and chemicals, £760 on spirits of wine, £190 on glass and earthenware, £460 on scientific appliances, and £350 on ice, lemon-juice, soda-water, and similar drinks. We use a ton and a quarter of ice a day; and every day two or three trollies of drugs have to be issued from the store for

the use of the patients. That doesn't include," he continued, while showing them a large room where a couple of men were making tinctures, "the money—£2700 a year—we spend on things for the surgeons. For instance, we spend over £10 a week on calico and flannel, another £10 a week on wool and tow, nearly another £10 on plaster, while surgical instruments cost us £500 a year, lint £270, antiseptic appliances £250, linseed-meal £100, and lard £50. The smallest item nowadays is leeches," he said, pointing to a large glass jar containing a hundred. "When I came here forty years ago we used to spend nearly £500 a year on leeches. Last year we spent only 50s."

WHERE REAL BENEVOLENCE COMES IN.

Outside the Dispensary were the waiting-halls for the out-patients, very many of whom, men, women, and children, were sitting on rows of seats like the pit audience of a theatre, waiting their turn to proceed in batches to a series of doors admitting them into the consulting-rooms. Passing on their way a large coffee bar, where a man was busy at work in a shrine of cups and saucers, and cakes and sweets, vending at a penny a cup coffee, tea, cocoa, or milk to exhausted patients, the House-Governor paused. "This is a new feature," he said, "now on its trial. Many patients come a great distance and have sometimes to wait a long while; they get fagged and tired, and a cup of tea not only refreshes them and keeps them in a good humour, but it prevents the dram bottle being brought into the place. The sweets are added to keep the youngsters quiet." A little further on he stopped again before a beautiful fountain, in Doulton's best style, inserted into the wall, where several patients were drinking. "If the Chaplain were here," he remarked to Dudgeon, "he would say, 'This is where real benevolence comes in.' It is a man's interest and duty to give regularly a money donation to the hospital, but he is not morally bound to put up a drinking-fountain in a waiting-hall to be a benefit to out-patients. This is a free gift from a gentleman in memory of a little child. It was he who fitted up the coffee bar for us. Considering that nearly 70,000 out-patients attend here every year, and that their attendances amount to hundreds of thousands of times, I think you will agree with me that it must be a boon to the people. The out-patients come in such shoals," he continued later on, "that we have had to adopt a sort of weeding process. We refuse no one ill who comes with a letter a first consultation, and we admit every surgical case whether the sufferer have a letter or not; but when we find that a patient really can pay for a good doctor, we are forced by the swarms of really destitute people to ask the applicant to do so.

A HOSPITAL CHEAT.

"A typical case occurred a short time ago. A man from the Transvaal appeared at an Ophthalmic Hospital in the City as an out-patient, and said he was very poor, having lost all his property in the war. On the strength of this he was admitted as an in-patient to undergo an operation, and after the operation fell ill with an internal disease, and was brought here and died. When his clothes were examined it was found he had £6000 in the bank, and his conscience having pricked him, he had sent, unknown to us, for a lawyer to make a will, and left £500 to the Eye Hospital. We exercise the greatest tact in weeding suspected cases, and the patients often benefit by the inquiry, as they get additional help from the Samaritan Fund." "What is that fund?" inquired Dyer; "I've often heard it mentioned since I came here." "It is a fund kept apart from the regular hospital funds, and is managed by a separate committee; it supplies artificial limbs and mechanical aids to poor people, sends patients to convalescent homes, and makes small grants of money to poor persons on leaving the hospital. We make it our boast that we never let anyone leave the hospital absolutely penniless if we can help it. A few shillings may be a god-send to a poor man, who on leaving the hospital may perhaps get nothing to eat till he earns it, and will tide him over starvation. As for the convalescent homes, most people know something about them. We send 800 patients a year to these homes, and support them while there; but the public don't know what the hospital does in giving away surgical appliances."

SURGICAL AID TO THE POOR.

"Two of the surgical societies give away each about 5000 appliances a year, and between them have distributed 100,000 artificial limbs, bands, trusses, elastic stockings, and other similar things since they were established. The Hospital Sunday Fund spent last year £1600 on this object. If you can only realise that one person out of every ten in the metropolis has to make use of some surgical appliance or other, you can appreciate the benefit conferred by the free distribution of these appliances. Poor persons, who would otherwise be a burden to the public, are enabled to earn a living and become useful members of society. Then the Samaritan Fund enables us to give free dinners to some of the out-patients who appear to be more in want of nourishment than medicine, and also milk to starving infants. The Samaritan Fund is thus one of the most useful branches of any hospital." Taking his watch then out of his pocket, he added, "You have been too long on your feet now to go over the nursing home in the next wing, and the medical college over yonder, which you can see from this window. Hundreds of students are educated in the college, and having obtained a regular training in the hospital, go forth to become family doctors or famous physicians. And not only does the hospital afford the best possible training to the family doctor, but it now supplies nearly all the nurses. Hundreds are trained in the hospital, and after acquiring experience in the ward, and systematic medical instruction, go forth with their certificate to assist the family doctor. Now for the Children's Ward, and we shall have seen most of the General Hospital.

IN THE CHILDREN'S WARD.

"My favourite ward," said the House-Governor, ushering in Dudgeon and Dyer on their arrival. "Here are forty beds full of little ones, all surgical cases. In some hospitals the children are stowed in cots among the adults, but we are able to keep them by themselves, which is much better. In an adults' ward they are apt to disturb the grown-up patients, and they are never so happy isolated as when put by themselves in a ward like this. Here are twenty cots on each side of the room, with stands fixed over them for the children to put their toys on, and beyond are other wards devoted to more surgical cases, and then medical wards—all in the same style." Evidently the House-Governor was a favourite, for lots of little heads peeped above the cots when his voice was heard, and a youngster shouted out lustily from the end of the ward—"Daddy—I say, daddy, look here!" "Keep quiet, you rogue, till I come," replied the House-Governor, good-naturedly. The boy continuing to beg him to come, the party walked down the ward to his cot. "A boy of nine," observed the House-Governor as they went along, "who has been here two months suffering from a stiff knee. He is nearly well, and we're going to send him to a convalescent home at Eastbourne next week." "Look here, look here!" shouted the boy, holding out a book—one of those gorgeously-bound volumes which Nelson and Sons issue for presents and prizes for two or three shillings. "Look here—'The Swiss Family Robinson,' full of pictures, which a kind lady has just given me. Look at all the gold upon the cover. You shall have it to read, daddy, when I have done." "Go on, you little rogue," said the House-Governor, poking him good-humouredly in the ribs, but evidently quite as well pleased as the boy.

THE KIND OF BOOK FOR A HOSPITAL.

Placing the book in Dudgeon's hands, he said, "That's the kind of book for a hospital. You would be astonished at the rubbish people send—old magazines, dirty and torn, and not in consecutive numbers, and then expect us to pay the carriage. We don't want rubbish, I tell them, but bright, cheerful books like these, lasting just long enough to be well read, and no longer. On sanitary grounds it doesn't do for a book to last too long in a hospital, and a bright cover excites the people's desire to read it far more than the strongest dull binding in calf." Passing then along the beds, he pointed out some of the cases to Dudgeon. "There's a new arrival," pointing to a stolid child who had been crying, but now was quiet. "Came in this morning. Fell off the kerb-stone and broke its leg. This one——ah, what, you've got a new drum; that *is* nice. This one broke his ankle in jumping off a chair. That one is a tracheotomy case. Swallowed poison, causing the throat to close, and we had to open the throat and insert a tube for him to breathe through. Nasty case; he has been here nearly a twelvemonth, but the worst is over, and the doctors think they'll save him. Hallo!" (taking up a little boy who had run up and clasped his knee). "This youngster has spent most of his life in the hospital.

He has always got some serious illness, and the moment he recovers he breaks a leg or arm, and comes in again. There —off you go" (speaking to the child). "He's leaving us to-morrow" (addressing Dudgeon again).

A WORD FOR M.P.'S.

"This one," he continued "is a lamp explosion case. The mother was turning down the wick of a cheap paraffin lamp, when it exploded and burnt the child all over." "Those beastly paraffin lamps!" exclaimed Dyer. "You may well say that," continued the House-Governor. "Every week we have to admit several people suffering from burns and explosions, and they say that nearly every week an inquest is held in London on somebody killed by them. Parliament insists upon safe lamps for the mines, but, considering that hundreds of people throughout the country are annually burnt or killed by oil lamps, why does it not insist upon safe lamps for the masses? Most of the cheap lamps might be marked, 'Certain death, or the house on fire, if upset,' and the manufacturers know it. Do you know that one-fifth of the fires in London are caused by mineral oil lamps?"

A CHILDREN'S HOSPITAL SUNDAY.

As they returned through the boys' surgical ward, they heard the boy with the stiff knee crowing afresh, and, looking round, saw the Chaplain entering with his pockets bulging out in a manner most unbecoming for a trim ecclesiastic. From these he extracted several toys and distributed them to those of the youngsters who appeared to be at all in the dumps, while the House-Governor whispered to Dudgeon, "The Chaplain's favourite walk is to the Mansion House, to pick up the cheap penny novelties that are sold in Cheapside. He'll keep the ward quiet the whole afternoon when he brings home something new and out of the common. Look at him; he's just as pleased as they are. His latest idea is to get up among Sunday school teachers a regular annual Children's Hospital Sunday. Each child might bring a toy, or a book, or a penny to the collection, and the proceeds could be divided among the children's wards of the various London hospitals. It's a splendid idea, and he hopes to persuade all the clergy to take it up before long." "You're wanted outside," said the Chaplain, coming up—"I shall be with you to lunch almost directly." "We'll see what it is" replied the House-Governor," and then we'll go upstairs through the hospital staff's quarters to the dining-room. We officials all feed together, and after your tiring inspection I am sure you must want some luncheon."

THE HOUSE-GOVERNOR WANTED.

When they reached the outside, where convalescent patients were walking about in the small but well-kept garden, or smoking in the pavilion in the centre set aside for that purpose, they saw a cart heaped up with bird-cages, in charge of a middle-aged man in a coarse grey tweed suit. He was the bird-fancier's executor, and the dead master of the little pets having been buried the day before, he had brought his bequest to the hospital. At the back of the cart was a splendid parrot, in a brand new cage, which, as the House-Governor went down the steps, startled him by exclaiming in the most natural voice in the world, "Mind how you fall, old fellow!" "Just the very thing for the Children's Ward," said the House-Governor, in a tone of delight. "I'll take it in to them at once. No, I won't, though; the Chaplain shall do it. He deserves the treat far more than myself—a really genuine, good-hearted fellow! Stop; he mustn't have it till after luncheon, or we shan't have him at table with us. Once he gets that parrot in the ward, there'll be no getting him out of it again." Finding the man could wait for a while with the canaries and larks and linnets, the House-Governor conducted Dudgeon and Dyer into the hospital again, followed by the farewell cry of the parrot—"Oh, you naughty boys; won't I tell your mother!"

THE LUNCHEON TOGETHER.

All three, delighted and amused, then traversed a corridor terminating in an extension of the hospital devoted to the staff. Each official had his own set of rooms, and in the basement was a kitchen devoted to the whole, communicating by a lift with a room on the ground floor overlooking the garden, where they lunched in common. Here assembled and already having luncheon were the Matron, the Secretary, and the Steward, several house-surgeons and physicians—one of the former of whom had attended both Dudgeon and Dyer,—and at the end of the table the Chaplain. Taking a seat at the top, the House-Governor placed Dudgeon and Dyer one on each side of him (in spite of the protests of the latter, who did not wish to thrust himself on "such great people"), and assisted them to the cold joint and the salad on the table, apologising for the simple character of the luncheon on the grounds that he wished them to see how they all lived every day. "In front of you are jugs of milk and table-beer, and if you care for cocoa and coffee the Chaplain will help you at the other end of the table." The conversation was at first about what they thought of the hospital, and by degrees it worked round to the question of Hospital Sunday. The Secretary was very indignant at the small results achieved hitherto by the Hospital Sunday Fund. "Bearing in mind the vast population of the metropolis, £30,000 or £40,000 is a paltry amount for the largest city in the world. Last year the collection amounted to only £36,000, and it costs £50,000 to keep the General Hospital alone going. The collection in London was less than in many of the provincial cities, notwithstanding its size and wealth; and yet the London people in a general way profess to be proud of their hospitals."

HARD KNOCKS FOR THE MIDDLE CLASSES.

This led to a discussion in which, perhaps out of delicacy for the representatives of capital and labour present, the Secretary directed his denunciations chiefly against the middle classes. "We train their doctors for them, we train their nurses, we spend our money in trying to find out cures for cancer, consumption, and other diseases they all suffer from, and yet they are as lumpy as lead to our appeals for contributions. Your £10,000-a-year-man gives large donations from benevolence, and other motives we need not discuss; and your £2-a-week-man gives a trifle because his wife and children, as well as himself, are liable to attend the hospital. But what can you do with the thousands of Londoners with incomes ranging from £300 a year upwards. They can't afford large donations, and out of pride won't have small ones published in the papers, and when the Hospital Sunday people take them in hand a threepenny-piece or sixpence mostly represents a year's contributions. The middle classes, fat and apathetic, want stirring up far more than the masses."

DYER HIMSELF PERFORMS AN OPERATION ON LEAVING.

After luncheon Dyer got up from his seat and said, "I hope you will excuse me now if I leave; I'm afraid the missis may be running about trying to find me. I thank you all from the bottom of my heart for your kindness. I'm not good at speechifying, but a man can feel gratitude if he can't find words to express it." "Well, Dyer," observed Dudgeon, wishing to avoid any scene, "you must have a few days' rest to get used to your one eye, and in the meantime your pay will run on from the day you left, as before. The office will tell you when to return to your work." "Thank you, sir, for your goodness. I believe you will find I shall always work as hard with one eye as with two." "There's a promise of the honest fulfilment in that," said the Chaplain, shaking his hand heartily, and, followed by the smiles of the Matron, the mechanic left the room with the House Governor. A few minutes afterwards the latter returned, and in an excited voice exclaimed, "What do you think? When his missis met him, he took from her a purse, and, placing it in my hand, said, 'That's for the hospital. The mates collected £9 12*s.* 4*d.* to keep me while out of work, and as I haven't been out of work, because the governor's kept me on, I want you to spend it on the poor fellows inside. I asked him to reflect—the sum was so large for a working man; but he said, 'It's not mine; it's the mates'. We workmen are not so mean as they sometimes say; and if we haven't done more for the hospital in the past, it's not because we're stingy, but because we don't know till we're ill and hard up the good it does to us chaps, and the kids, and the missis. If you'd only send among us a chap that's got the gift of the gab, and tell us all you've shown me this morning, you wouldn't want much tugging to haul the shillings out of our pockets."

DUDGEON RESCUED BY HIS WIFE.

Dudgeon seemed delighted at the conduct of his workman, but before he could say anything the door opened afresh, and a lady, rushing in, threw herself upon his unwounded shoulder, exclaiming: "My poor, dear husband, to think you should have been nearly killed, and brought to this dreadful hospital. I took special trains the moment

the news was wired to us, and have come to arrange to carry you home immediately." "My dear," said Dudgeon, gravely, "consider who's here. Since I was brought here insensible on a stretcher, I have been treated with kindness I can never forget, and have seen so much goodness diffused by these dear people that I shall always take an interest in hospital work. Another day we must come together and go over the place. To-day I have tired myself enough, and I shall really be ill if I have any more excitement." Introducing then the House-Governor, the Matron, and the Chaplain to his wife, he made them promise to come and dine with him at his house in Mortgramit Square as soon as he was well, not forgetting to bring with them Sister Agatha.

A LESSON LEARNED BY CRŒSUS.

"You have shown me" he said as he quitted the room, that self-interest as well as benevolence should dictate a readier appreciation of hospital work, and you will find, I think, so far as I am concerned, without my making any rash promises, that the General Hospital has secured in me a Governor for Life." And so it had; for the same day the House-Governor received from him a cheque for £10,000, to be applied to various branches of the hospital as he thought fit, and there are rumours about now that he proposes spending ten times that sum in adding a Dudgeon Wing to it. If he does, his munificence will help to mitigate a little of the human misery of our great metropolis. Yet only a little, so vast is the misery in a city which counts its sick yearly by hundreds of thousands. The magnanimous behaviour of Dudgeon and Dyer consequently does not exhaust the good to be done, and plenty, alas, is left to be accomplished by kindly hearts and generous purses. What occurred to them may happen to you or I ere the year is out; and let us hope, therefore, that if we are carried helpless into an accident ward, we shall not have it on our conscience that, knowing what we now do of the good work the hospital does, we were shabby in our contributions at church on Hospital Sunday.

"GOD LOVETH A CHEERFUL GIVER."

THE HOSPITALS WEEK.

A PROLOGUE TO HOSPITAL SUNDAY.

The gospel to-day we would publish
Is the old one of brotherly love;
The crusade we once more would establish
Is the sympathy taught from above.
Whilst this gospel needeth no teaching
To prove that its precepts are pure,
This crusade will have cause for good preaching
To make its accomplishment sure.

In our midst there are many who rarely
(Nor even by chance nor by stealth)
May gaze on Hope's countenance fairly,
Or compass the hand-clasp of Health;
Whose eyes with much watching are aching,
And weary with weeping, and worn,
Whose hearts with long suffering are breaking,
Whose bodies with torture are torn.

Who long through the night for the morrow,
Then pine for the night-time again;
Who only find solace in sorrow,
Whose constant companion is Pain.
'Tis for these that in Health's name we greet you—
For these on whom Sickness doth frown;
'Tis for these we in Hope's name entreat you—
Whom Despair hath cast utterly down.

They are gathered and garnered together,
The weary, the weak, and the worn,
Secure from the stress of Life's weather,
And safe from its shame and its scorn.
From country, from coast, and from city,
Like sheep to a fold they have come,
In the Hospitals mercy and pity
Provide them a rest and a home.

From these Houses of Mercy and Pity
A desolate cry doth ascend,
That rings high o'er the roar of our city,
And resounds through the length of the land;
'Tis the voice of a great lamentation
From the thousands that sorrow to-day,
Whose appeal for your alms and oblations
You cannot but choose to obey.

THE HOSPITALS WEEK.

From Monday, June 21st, to Saturday, June 26th, 1886.

ITS OBJECTS ARE:—To extend the interest and support already given to the Hospitals and Medical Charities, by arousing and fixing public attention to the following facts:

(1) The pressing pecuniary necessities of these institutions; and
(2) The importance of their efficient maintenance to all classes of the community, from the highest to the lowest.

At the meetings, which will present many features of special interest, it is not proposed to make any collection, but to invite all intelligent citizens of every class to make a point of—

(*a*) Attending some place of worship on Hospital Sunday, June 27th, 1886;
(*b*) Sending a contribution direct to the Lord Mayor at the Mansion-house, or
(*c*) Placing a donation in the boxes which will be fixed outside the Mansion-house for the convenience of those who prefer to give in that way.

LIST OF THE MEETINGS.

INAUGURAL MEETING. THURSDAY, June 17th. *Mansion House*, 3 P.M.

President—The Lord Mayor.
Mr. Brudenell Carter, F.R.C.S., President of the Medical Society, will deliver an oration.
Speakers—Cardinal Manning; Sir Edmund Hay Currie; Sir Spencer Wells, Bart., F.R.C.S.; Sir Risdon Bennett M.D., F.R.S.; and others.

MONDAY, 21st June.—*Lambeth Palace Library*, 3 P.M.
President—Sir Andrew Clark, Bart., M.D., F.R.S.
Speakers—Lord Sandhurst, Under-Secretary for War; Gen. Crawford Fraser, V.C., M.P.; Mr. O. V. Morgan, M.P.; Sir Hy. Peek, Bart.; Canon Erskine Clarke.

TUESDAY, 22nd June.—*The Rink Hall, Blackheath*, 8 P.M.
President—The Earl of Dartmouth.
Speakers—Baron F. de Rothschild, M.P.; Baron Henry de Worms, M.P.; Mr. Henry C. Burdett.

WEDNESDAY, 23rd June.—*Kensington Town Hall*, 3 P.M
President—The Duke of Norfolk.
Speakers—Sir Algernon Borthwick, M.P.; The Right Hon. the Marquis of Hartington, M.P.; The Right Hon. W. H. Smith, M.P.; Sir Wm. Mac Cormac, F.R.C.S.

THURSDAY, 24th June.—*St. Andrew's Hall, Newman-street*, 8 P.M.
President—The Earl of Northbrook.
Speakers—Lord Charles Beresford, M.P.; Mr. Seager Hunt, M.P.; Mr. Bauman, M.P.; Rev. Canon Barker; Major Ross, M.P.

FRIDAY, 25th June.—*Highbury Athenæum*, 8 P.M.
President—The Duke of Westminster, K.G.
Speakers—Mr. R. Chamberlain, M.P.; Mr. Ince, Q.C.; Mr. Waddy, Q.C.; Mr. Bartley, M.P.; Mr. Cowley Lambert; Dr. Buchanan; Sir Dyce Duckworth, M.D.; Mr. Murdock, M.P.; Mr. Bigwood, M.P.

SATURDAY, 26th June—*Stratford Town Hall*, 4 P.M.
President—H.R.H. the Duke of Cambridge.
Speaker—The Marquis of Salisbury, K.G.

*** The meetings will all be free and open, and no tickets of admission will be required.

NOTICES TO THE CLERGY AND MINISTERS OF RELIGION.

The Proprietors of THE LANCET will send free copies of this Special Supplement on application to any clergyman or minister of religion who may require them for distribution amongst the more wealthy members of their congregations.

It is requested that an early notification may be sent to the Editor of THE LANCET, 423, Strand, W.C., of all special sermons to be preached in aid of the Hospitals at any of the services on Hospital Sunday, June 27th. All such notices should reach this Office not later than Wednesday, June 23rd, with the subject of each discourse, in time to appear in the second Special Supplement, which will be issued with THE LANCET of Saturday, June 26th.

A third Supplement, containing a report of the special sermons preached on Hospital Sunday, will be published with THE LANCET of July 3rd, and all extracts of sermons intended for publication should reach the Editor not later than Tuesday, June 29th.

A YEAR'S WORK IN THE HOSPITALS AND MEDICAL CHARITIES OF LONDON.

The following tables and figures should be studied in conjunction with the remarks following the Summary on the last page, to make their bearing more intelligible and better understood.

No. I. DISTRICT:

COMPRISING BATTERSEA, WANDSWORTH, PUTNEY, ROEHAMPTON, WIMBLEDON, MERTON, TOOTING, BALHAM, CLAPHAM, STREATHAM, BRIXTON, LAMBETH, AND SOUTH LAMBETH.

No. of beds.	Name of hospital or dispensary.	In-patients.	Out-patients.	Ex-penditure.	Extra ex-penditure, buildings, &c.	Total expendi-ture.	Income.		Total income.
							Charitable.	Proprietary.	
				£	£	£	£	£	£
24	General Lying-in Hospital	395	800	3142	—	3142	958	1941	2899
51	Royal Hospital for Children and Women	479	7139	3113	340	3453	2487	883	3370
10	Hospital for Diseases of the Skin	26	6061	1209	—	1209	498	770	1268
500	Metropolitan Convalescent Hospital ...	3731	—	6327	955	7282	6289	410	6699
585		4631	13,993	13,791	1295	15,086	10,232	4004	14,236
—	Battersea Dispensary	—	5340	1729	—	1729	82	1647	1729
—	Brixton &c. Dispensary	—	2656	601	—	601	480	129	609
—	Clapham Dispensary	—	1500	378	—	378	298	—	298
—	Gipsy Hill Dispensary	—	801	328	—	328	115	254	369
—	Royal South London Dispensary	—	5263	829	—	829	701	97	798
—	South Lambeth Dispensary	—	2149	578	—	578	324	207	531
—	South London Medical Aid Institution ...	—	1809	737	—	737	129	413	542
—	Wandsworth Common Dispensary	—	1077	238	—	238	64	168	232
585		4631	37,588	19,209	1295	20,504	12,425	6919	19,344

No. II. DISTRICT:

COMPRISING SOUTHWARK, NEWINGTON, KENNINGTON, BERMONDSEY, CAMBERWELL, PECKHAM, DULWICH, ROTHERHITHE, DEPTFORD, GREENWICH, LEWISHAM, LEE, BLACKHEATH, CHARLTON, WOOLWICH, SYDENHAM, ANERLEY, PENGE, AND BECKENHAM.

No. of beds.	Name of hospital or dispensary.	In-patients.	Out-patients.	Ex-penditure.	Extra ex-penditure, buildings, &c.	Total expendi-ture.	Income.		Total income.
							Charitable.	Proprietary.	
				£	£	£	£	£	£
24	Miller Hospital	153	12,652	3138	363	3501	1601	300	1901
238	Seamen's Hospital	1551	5874	10,802	—	10,802	6981	4831	11,812
60	Evelina Hospital	328	12,010	5588	—	5588	3246	876	4122
32	Home for Sick Children...	195	780	1097	—	1097	866	184	1050
14	Royal South London Ophthal. Hospital ...	129	6501	1254	—	1254	1150	408	1558
388		2362	37,817	21,879	363	22,242	13,844	6599	20,443
—	Camberwell Provident Dispensary	—	11,600	1642	—	1642	432	1231	1663
—	Forest-hill Dispensary	—	6023	578	—	578	236	326	562
—	West Dulwich Dispensary	—	365	61	—	61	16	36	52
388		2362	55,805	24,160	363	24,523	14,528	8192	22,720

No. III. DISTRICT:

COMPRISING KENSINGTON, WESTMINSTER CITY, PIMLICO, CHELSEA, MAYFAIR, FULHAM, HAMMERSMITH, CHISWICK, BRENTFORD, ACTON, EALING, AND THE WESTWARD.

No. of beds.	Name of hospital or dispensary.	In-patients.	Out-patients.	Ex-penditure.	Extra ex-penditure buildings, &c.	Total expendi-ture.	Income.		Total income.
							Charitable.	Proprietary.	
				£	£	£	£	£	£
351	St. George's Hospital	3069	16,644	20,742	3298	24,040	15,551	6830	22,381
101	West London Hospital	1197	14,933	5386	92	5478	4134	17	4151
200	Westminster Hospital	2113	23,440	11,304	—	11,304	7761	3052	10,813
321	Brompton Hospital for Consumption ...	1646	13,895	24,781	—	24,781	21,435	3909	25,344
22	Belgrave Hospital for Children	129	1637	1301	—	1301	1288	16	1304
33	Cheyne Hospital for Incurables	45	—	1533	—	1533	1802	464	2266
74	Victoria Hospital	696	8737	4476	—	4476	3630	868	4798
63	Chelsea Hospital for Women	339	3577	3043	—	3043	2453	954	3407
14	Grosvenor Hospital	93	1756	910	—	910	681	304	985
105	Cancer Hospital...	622	996	8534	—	8534	7804	2743	10,547
1284		10,549	82,515	82,010	3390	85,400	66,839	19,157	85,996
—	Brompton Dispensary	—	824	408	—	408	184	245	429
—	Chelsea Dispensary	—	5317	488	—	488	370	113	483
—	Kensington Dispensary	—	5168	776	—	776	720	49	769
—	Royal Pimlico Dispensary	—	10,739	910	—	910	326	614	940
—	St. George's and St. James's Dispensary...	—	4545	567	—	567	435	15	450
—	St. George, Hanover-square, Dispensary...	—	2344	771	—	771	488	195	683
—	St. Paul and St. Barnabas Dispensary ...	—	2739	517	—	517	401	131	532
—	Western Dispensary...	—	8244	1056	—	1056	474	628	1102
1284		10,549	125,416	87,503	3390	90,893	70,237	21,138	91,375

No. IV. DISTRICT:

COMPRISING PADDINGTON, BAYSWATER, NOTTING-HILL, MARYLEBONE, KILBURN, ST. JOHN'S-WOOD, HAMPSTEAD, FINCHLEY, HIGHGATE, KENTISH-TOWN, CAMDEN-TOWN, AND THE NORTH-WEST.

No. of beds.	Name of hospital or dispensary.	In-patients.	Out-patients.	Ex-penditure.	Extra ex-penditure, buildings, &c.	Total expendi-ture.	Income.		Total income.
							Charitable.	Proprietary.	
				£	£	£	£	£	£
46	North-West London Hospital	493	7935	3062	1482	3062	2720	226	2946
244	St. Mary's Hospital	2613	25,815	17,414	—	18,896	11,023	1493	12,516
249	Middlesex Hospital	2879	32,985	26,031	—	26,031	10,166	5393	15,559
37	North London Hospital for Consumption	301	4150	3797	—	3797	3355	81	3436
118	Ventnor Consumption Hospital	584	—	8829	—	8829	3506	4522	8028
30	Home for Incurable Children	35	—	1574	—	1574	722	415	1137
27	Paddington-green Hospital	332	12,342	2034	—	2034	3454	243	3697
40	Queen Charlotte's Hospital	857	998	3718	—	3718	2282	509	2791
26	New Hospital for Women	210	2797	2030	—	2030	1227	812	2039
52	Samaritan Free Hospital	497	4923	5192	—	5192	4630	115	4745
36	St. Saviour Cancer Hospital	91	510	2873	—	2873	983	783	1766
25	Hospital for Epilepsy, &c.	91	721	1718	—	1718	1256	572	1828
20	Western Ophthalmic Hospital	54	1813	588	—	588	345	259	604
37	National Orthopædic Hospital	106	699	1210	—	1210	630	696	1326
50	Royal Orthopædic Hospital	143	1160	1982	—	1982	1433	960	2393
54	London Temperance Hospital	584	3322	3492	—	3492	3013	520	3533
—	National Dental Hospital	—	20,367	703	—	703	305	344	649
25	Establishment for Gentlewomen	111	—	2299	—	2299	1102	1124	2226
16	Hampstead Home Hospital	71	—	1067	—	1067	402	690	1092
1132		9852	120,337	89,613	1482	91,095	52,554	19,757	72,311
—	Child's-hill Dispensary	—	112	288	—	288	48	230	278
—	Hampstead Dispensary	—	9246	813	—	813	283	534	817
—	Kilburn &c. Dispensary	—	2989	514	—	514	497	55	552
—	Kilburn Provident Dispensary	—	3376	1004	—	1004	88	927	1015
—	Margaret-street Infirmary	—	3000	320	—	320	360	150	510
—	Notting-hill Dispensary	—	4332	277	—	277	104	115	219
—	Paddington Dispensary	—	8814	635	—	635	261	425	686
—	Portland-town Dispensary	—	2283	152	—	152	129	17	146
—	Portobello-road Dispensary	—	145	56	—	56	29	34	63
—	St. John's-wood Dispensary	—	1424	538	—	538	228	323	551
—	St. Marylebone Dispensary	—	3469	759	—	759	836	405	1241
—	Westbourne Dispensary	—	3411	415	—	415	193	283	476
—	Western General Dispensary	—	16,716	1307	—	1307	1192	56	1248
1132		9852	179,558	96,691	1482	98,173	56,742	23,511	80,053

No. V. DISTRICT:

COMPRISING ST. PANCRAS, BLOOMSBURY, WESTMINSTER LIBERTIES, HOLBORN, ST. LUKE'S, CLERKENWELL, FINSBURY, SHOREDITCH, ISLINGTON, AND THE NORTH.

No. of beds.	Name of hospital or dispensary.	In-patients.	Out-patients.	Ex-penditure.	Extra ex-penditure, buildings, &c.	Total expendi-ture.	Income.		Total income.
							Charitable.	Proprietary.	
				£	£	£	£	£	£
154	Charing-cross Hospital	1584	22,615	14,352	—	14,352	7787	3500	11,287
36	French Hospital	351	2420	2563	—	2563	3583	181	3764
33	Great Northern Central Hospital	313	10,054	3165	—	3165	3437	252	3689
206	King's College Hospital	2011	17,277	16,422	—	16,422	8048	3473	12,421
160	Royal Free Hospital	1728	21,853	11,275	—	11,275	6202	1355	7557
50	St. John and St. Elizabeth Hospital	79	—	1522	—	1522	1123	536	1659
209	University College Hospital	2960	35,170	20,456	1004	21,460	13,294	4737	17,031
26	Royal Hospital for Diseases of the Chest ...	122	5100	3009	—	3009	2879	1090	3969
80	Alexandra Hospital	167	121	2192	300	2492	1696	1480	3176
177	Hospital for Sick Children	1394	14,281	9883	856	10,739	11,303	658	11,961
22	British Lying-in Hospital	151	671	1551	—	1551	651	949	1600
30	City of London Lying-in Hospital	259	1118	2398	—	2398	565	2259	2824
66	Hospital for Women	580	5087	7036	809	7845	5972	2491	8463
190	London Fever Hospital	528	—	8346	568	8914	6571	2626	9197
34	St. Mark's Hospital	310	850	2237	—	2237	1519	2353	3872
25	National Hospital for Diseases of the Heart	100	2900	2028	—	2028	1625	350	1975
104	National Hospital for Paralysis, &c.	305	3312	4965	—	4965	2903	1724	4627
13	Central London Ophthalmic Hospital ...	133	7247	793	—	793	599	1535	2134
50	Westminster Hospital	286	7987	1594	—	1594	1592	1502	3094
25	City Orthopædic Hospital	109	2591	1137	—	1137	1210	103	1313
20	St. John's Hospital for Skin Diseases ...	134	3354	2638	—	2638	1755	850	2605
15	Central Throat and Ear Hospital	237	4946	1650	—	1650	737	1464	2201
80	London Homœopathic Hospital	656	9007	4688	1928	6616	2834	4194	7028
—	Dental Hospital	—	27,083	1319	—	1319	1294	360	1654
1803		14,377	206,244	127,219	5465	132,684	89,079	40,022	129,101
—	Bloomsbury Dispensary	—	3837	803	—	803	283	60	343
—	City Dispensary	—	4777	1317	—	1317	884	162	1046
—	City of London and E. London Dispensary	—	4915	651	—	651	158	650	808
—	Farringdon Dispensary	—	8306	631	—	631	217	399	616
—	Finsbury Dispensary	—	15,271	808	—	808	484	354	838
—	Holloway and N. Islington Dispensary ...	—	7157	1127	—	1127	555	424	979
—	Islington Dispensary	—	13,181	1003	—	1003	319	618	937
—	Metropolitan Dispensary	—	4697	568	—	568	419	304	723
—	Public Dispensary	—	3661	730	—	730	542	172	714
—	Royal Maternity Charity	—	3331	2132	—	2132	532	1143	1675
—	St. Pancras and Northern Dispensary ...	—	1805	472	—	472	326	169	495
—	Westminster General Dispensary	—	7314	533	—	533	382	225	607
1803		14,377	283,356	137,934	5465	143,449	94,180	44,702	138,882

No. VI. DISTRICT:

COMPRISING BETHNAL-GREEN, TOWER HAMLETS, CLAPTON, TOTTENHAM, STRATFORD, STOKE NEWINGTON, HACKNEY STEPNEY, LIMEHOUSE, POPLAR, WEST HAM, AND THE EAST.

No. of beds.	Name of hospital or dispensary.	In-patients.	Out-patients.	Ex-penditure.	Extra expenditure, buildings, &c.	Total expenditure.	Income. Charitable.	Income. Proprietary.	Total income.
				£	£	£	£	£	£
125	German Hospital	1387	23,632	9162	—	9162	6623	2403	9026
790	London Hospital	8106	67,942	50,975	9351	60,326	25,770	16,994	42,764
20	Metropolitan Free Hospital	285	47,536	4370	—	4370	4360	843	5203
50	Poplar Hospital	569	7700	2842	—	2842	3887	301	4188
50	Tottenham Hospital	502	4326	2858	—	2858	2383	484	2867
164	City of London Chest Hospital	989	15,860	9534	—	9534	7141	972	8113
92	East London Children's Hospital	978	14,309	6741	—	6741	6045	376	6421
64	North-Eastern Hospital	653	13,801	5094	—	5094	6384	960	7344
100	Royal London Ophthalmic Hospital	2118	25,863	6800	—	6800	5230	1258	6488
28	Invalid Asylum	169	—	1087	—	1087	682	332	1014
90	Mrs. Gladstone's Home	1237	—	1741	—	1741	1408	374	1782
1573		16,993	221,059	101,204	9351	110,555	69,913	26,297	95,210
—	Eastern Dispensary	—	4660	574	—	574	191	336	527
—	London Dispensary	—	2787	581	—	581	196	278	474
—	Queen Adelaide Dispensary	—	4353	500	—	500	609	126	735
—	Stamford-hill Dispensary	—	4995	608	—	608	498	98	596
—	Tower Hamlets Dispensary	—	4308	412	—	412	229	166	395
—	West Ham Dispensary	—	17,829	862	—	862	859	129	988
1573		16,993	259,791	104,741	9351	114,092	72,495	26,430	98,925

SUMMARY.

It will be seen from the following summary that the hospitals and medical charities of London, during the twelve months ending Dec. 31st, 1885, relieved upwards of 1,000,000 patients at a total cost of £491,634. The total income from all sources was only a little over £451,000, so that there was an actual deficiency on the year's working of upwards of £40,000.

No. of beds.	No. of district.	In-patients.	Out-patients.	Ex-penditure.	Extra expenditure, buildings, &c.	Total expenditure.	Income. Charitable.	Income. Proprietary.	Total income.
				£	£	£	£	£	£
585	No. I. District	4631	37,585	19,209	1295	20,504	12,425	6919	19,344
388	No. II. ,, ...	2382	85,805	24,160	363	24,523	14,528	8192	22,720
1284	No. III. ,, ...	10,549	125,416	87,503	3390	90,893	70,237	21,138	91,375
1152	No. IV. ,, ...	9852	179,558	90,691	1482	98,173	56,742	23,311	80,053
1803	No. V. ,, ...	14,377	283,356	137,984	5465	143,449	94,180	44,702	138,882
1573	No. VI. ,, ...	16,993	259,791	104,741	9351	114,092	72,495	26,430	98,925
6765		58,964	941,511	470,288	21,346	491,634	320,607	130,692	451,299
						451,299			
				Deficit		40,335			

AN APPEAL ON THE FACTS.

OUT of four million inhabitants it will be seen that upwards of one million *directly* received relief from the hospitals during this year alone. Who shall estimate the amount of benefit which the hospitals have *indirectly* given to Londoners in addition, through the medical profession and skilled nurses, whom the hospitals have trained to minister to those who can afford to be treated at their own homes in the hour of sickness? Towards defraying the cost to the hospitals of directly relieving in a single year this grand total of human misery, the available funds were inadequate to the extent of £40,000, a deficiency which would have been nearly doubled except for the money at present subscribed on Hospital Sunday. We ask the wealthy, the thoughtful, and the generous to study the above figures. They will show to all how each charity does its work, and what is the principle upon which that work is carried on.

Some people hold, with Mr. Spurgeon, that the managers of a charity should never be waiters upon Providence, but that funds should be collected and placed in the bank before orders are given for the work to be undertaken. This list will be found to contain institutions which have managed to make both ends meet and a little over, so that Mr. Spurgeon's principles are well represented. Unfortunately, however, it is not always possible to conduct a hospital on such business-like principles, or many sick and suffering folk would fare badly indeed at times. To be of the greatest utility, a hospital has often to be placed in the midst of a dense and indigent population, who have not the means of supporting it adequately, and the managers have therefore to appeal to the charitable who live in the wealthier parts of the town. In such circumstances it necessarily happens that the hospital is in a chronic state of impecuniosity, and many such institutions will be found with the others given here. It is not too much to say the very varying condition of the hospitals of London revealed in these Tables must include every conceivable variety of circumstance, and so be calculated to meet the views of every group of philanthropists. This fact, coupled with the remembrance that the crusade to be conducted throughout the Hospitals Week, as a prologue to Hospital Sunday, is a united movement in favour of all the hospitals, should call forth an amount of enthusiasm worthy of so great a cause, and the pressing pecuniary needs of a class of charities the efficient maintenance of which is a matter of vital importance to all classes of the community. At least £80,000 is needed. Shall it not be forthcoming? Will the flowers of so fragrant a garden be neglected by men and women who have means? The receipts on Hospital Sunday will afford the best answer. In London to-day

> The charities which soothe, and heal, and bless,
> Lie scattered at the feet of men like flowers.

Who will not gather a button-hole at least, if a bouquet be indeed beyond their resources?